

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

Identifying information.

2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

3. Relevant financial activities outside the submitted work.

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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Royalties: Funds are coming in to you or your institution due to your

Kearney 1



Section 1.	Identifying Inform	ation				
1. Given Name (First Name) David		2. Surname (Last Name) Kearney		3. Date 26-July-2019		
4. Are you the corresponding author?		✓ Yes No				
5. Manuscript Title Preoperative instructions and postoperative care in the 21st century						
6. Manuscript Identifying Number (if you know it)						
Section 2.	The Work Under Co	onsideration for Publi	ication			
Did you or your inst any aspect of the su statistical analysis, e	titution at any time recei ubmitted work (including	ve payment or services fron but not limited to grants, d		ommercial, private foundation, etc.) for esign, manuscript preparation,		
Section 3.	Relevant financial	activities outside the	submitted work.			
of compensation) clicking the "Add	with entities as descri	bed in the instructions. Uport relations hips that we	lse one line for each entity; a	lationships (regardless of amount add as many lines as you need by nonths prior to publication.		
Section 4.	Intellectual Proper	ty Patents & Copyri	ghts			
ا Do you have any	patents, whether plani	ned, pending or issued, b	roadly relevant to the work	? ☐ Yes 🗸 No		

Kearney 2



Section 5.	Relationships not covered above			
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At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements On occasion, journals may ask authors to disclose further information about reported relationships.				
Section 6.	Disclosure Statement			
Based on the abo	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box			
Dr. Kearney has	nothing to disclose.			

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.

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Liska 1



Section 1.	Identifying Inform	nation			
1. Given Name (First Name) David		2. Surname (Last Name) Liska	3. Date 26-July-2019		
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name David E. Kearney		
5. Manuscript Title Preoperative instructions and postoper		rative care in the 21st cent	ury		
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Are there any ren	evant connicts of intere	est?			
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Holubar 1



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