

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Peng

2. Surname (Last Name)
Han

3. Date
09-April-2017

4. Are you the corresponding author? ☒ Yes ☐ No

5. Manuscript Title
Laparoscopic assisted multi-visceral resection in stage IV rectal cancer

6. Manuscript Identifying Number (if you know it)
JXYM-17-74

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Dr. Han has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Binbin

2. Surname (Last Name)

Cui

3. Date

09-April-2017

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Peng Han

5. Manuscript Title

Laparoscopic assisted multi-visceral resection in stage IV rectal cancer

6. Manuscript Identifying Number (if you know it)

JXYM-17-74

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Are there any relevant conflicts of interest?

☐ Yes

☒ No

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Dr. Cui has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Bomiao

2. Surname (Last Name)
Zhang

3. Date
09-April-2017

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Peng Han

5. Manuscript Title
Laparoscopic assisted multi-visceral resection in stage IV rectal cancer

6. Manuscript Identifying Number (if you know it)
JXYM-17-74

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Section 1. Identifying Information

1. Given Name (First Name) Chengxin	2. Surname (Last Name) Song	3. Date 09-April-2017
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Peng Han
5. Manuscript Title Laparoscopic assisted multi-visceral resection in stage IV rectal cancer		
6. Manuscript Identifying Number (if you know it) JXYM-17-74		

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Yanlong

2. Surname (Last Name)

Liu

3. Date

09-April-2017

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☐ Yes

☒ No

Corresponding Author's Name

Peng Han

5. Manuscript Title

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6. Manuscript Identifying Number (if you know it)

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