

#### 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.

#### 1. Identifying information.

### 2. The work under consideration for publication.

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Section 1. Identifying Inform	ation				
1. Given Name (First Name) Jin	2. Surname (Last Name) Xu	3. Date 16-July-2020			
4. Are you the corresponding author?	✓ Yes No				
<ol> <li>Manuscript Title         Narrative Review of Wang Yutang's clinical experience in the treatment of breast cancer with liver depression and spleen deficiency and liver kidney yin deficiency         Manuscript Identifying Number (if you know it)         LCM-2020-TCM-05(LCM-20-17)     </li> </ol>					
	onsideration for Publication	pent. commercial, private foundation, etc.) for			
Did you or your institution <b>at any time</b> receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)? Are there any relevant conflicts of interest? Yes V No					
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Do you have any patents, whether planr	ned, pending or issued, broadly relevant to the	e work? Yes 🖌 No			



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## Section 6. Disclosure Statement

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Dr. Xu has nothing to disclose.

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1. Given Name (First Name) Wenshuo	2. Surname (Last Name) Zhao	3. Date 16-July-2020			
4. Are you the corresponding author?	Yes No				
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