Date: ___2022-8-18_____ Your Name: __Lin Ding_____ Manuscript Title: _ Clarification of issues brought up by 'Is continuing nursing interventions reduce the incidence of intraoperative pressure ulcers for breast cancer patients' Manuscript number (if known): ______

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		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initial	planning of the work
1	All support for the present	XNone	
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	medical writing, article		
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2	Grants or contracts from	XNone	
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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	X None	
0	testimony		
7	Support for attending	X None	
	meetings and/or travel		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	_XNone	
	Safety Monitoring Board or		
10	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society, committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X None	
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other		
13	services	V Nana	
13	Other financial or non- financial interests	XNone	

None.

Please place an "X" next to the following statement to indicate your agreement:

Date:___2022-8-18___ Your Name:__Shuang Ding_ Manuscript Title:_ Clarification of issues brought up by 'Is continuing nursing interventions reduce the incidence of intraoperative pressure ulcers for breast cancer patients' Manuscript number (if known):_____

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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	X None	
0	testimony		
7	Support for attending	X None	
	meetings and/or travel		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	_XNone	
	Safety Monitoring Board or		
10	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society, committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X None	
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other		
13	services Other financial or non	X None	
13	Other financial or non- financial interests		

None.

Please place an "X" next to the following statement to indicate your agreement:

Date:___2022-8-18____ Your Name:__Chunmei He____ Manuscript Title:_ Clarification of issues brought up by 'Is continuing nursing interventions reduce the incidence of intraoperative pressure ulcers for breast cancer patients' Manuscript number (if known):_____

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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

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	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	X None	
0	testimony		
7	Support for attending	X None	
	meetings and/or travel		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	_XNone	
	Safety Monitoring Board or		
10	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society, committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X None	
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other		
13	services Other financial or non	X None	
13	Other financial or non- financial interests		

None.

Please place an "X" next to the following statement to indicate your agreement:

Date:___2022-8-18_ Your Name:__Qifa Zhang_ Manuscript Title: Clarification of issues brought up by 'Is continuing nursing interventions reduce the incidence of intraoperative pressure ulcers for breast cancer patients' Manuscript number (if known):_____

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6	Payment for expert	X None	
0	testimony		
7	Support for attending	X None	
	meetings and/or travel		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	_XNone	
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10	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society, committee or advocacy		
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11	Stock or stock options	X None	
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other		
13	services Other financial or non	X None	
13	Other financial or non- financial interests		

None.

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Date: ___2022-8 18__ Your Name: __Jingjing An__ Manuscript Title: _ Clarification of issues brought up by 'Is continuing nursing interventions reduce the incidence of intraoperative pressure ulcers for breast cancer patients' Manuscript number (if known):______

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6	Payment for expert	X None	
0	testimony		
7	Support for attending	X None	
	meetings and/or travel		
8	Patents planned, issued or	XNone	
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9	Participation on a Data	_XNone	
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10	Leadership or fiduciary role	XNone	
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11	Stock or stock options	X None	
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
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13	services	V Nana	
13	Other financial or non- financial interests	XNone	

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