

ICMJE DISCLOSURE FORM

Date: 2023-3-24
 Your Name: Weiting Zhang
 Manuscript Title: Development and application of a specialist nurse-led multidisciplinary team model in the perioperative care of patients undergoing simultaneous pancreas and kidney transplantation
 Manuscript number (if known): _____

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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Please summarize the above conflict of interest in the following box:

None

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ICMJE DISCLOSURE FORM

Date: 2023-3-24
 Your Name: Xiuli Feng
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ICMJE DISCLOSURE FORM

Date: 2023-3-24
 Your Name: Xuanying Deng
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ICMJE DISCLOSURE FORM

Date: 2023-3-24

Your Name: Min Jin

Manuscript Title: Development and application of a specialist nurse-led multidisciplinary team model in the perioperative care of patients undergoing simultaneous pancreas and kidney transplantation

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Date: 2023-3-24

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Manuscript Title: Development and application of a specialist nurse-led multidisciplinary team model in the perioperative care of patients undergoing simultaneous pancreas and kidney transplantation

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Date: 2023-3-24

Your Name: Jiahui Xu

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Your Name: Yuhe Guo

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