Date:	2021-11-22		
Your Name:	Υι	ufan Wei	
<b>Manuscript Title</b>	: Surgical manage	ment in phyllodes	s tumors of the breast: a systematic review and meta-analysis
Manuscript num	ber (if known):		
	•	•	se all relationships/activities/interests listed below that are

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4	Consulting fees	_vNone	

5	Payment or honoraria for lectures, presentations, speakers bureaus,	VNone			
	manuscript writing or educational events				
6	Payment for expert	_vNone			
	testimony				
7	Support for attending meetings and/or travel	_vNone			
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8	Patents planned, issued or	_vNone			
	pending				
9	Participation on a Data	_vNone			
	Safety Monitoring Board or				
	Advisory Board				
10	Leadership or fiduciary role	VNone			
	in other board, society, committee or advocacy				
	group, paid or unpaid				
11	Stock or stock options	√ None			
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12	Receipt of equipment,	√ None			
	materials, drugs, medical				
	writing, gifts or other services				
13	Other financial or non-	_vNone			
	financial interests				
Ple	Please summarize the above conflict of interest in the following box:				
	The authors have no confl	icts of interest to declare			

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Date:	2021-11-22	
	Yanying Yu	
Manuscript Title: Su	Surgical management in phyllodes tum	ors of the breast: a systematic review and meta-analysis
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	report all support for the work reporte disclosure is the past 36 months.	d in this manuscript without time limit. For all other items,

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5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	vNone	
6	Payment for expert testimony	VNone	
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9	Participation on a Data Safety Monitoring Board or	VNone	
10	Advisory Board  Leadership or fiduciary role in other board, society,	VNone	
44	committee or advocacy group, paid or unpaid	, N	
11	Stock or stock options	VNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	_vNone	
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2021-11-22	
Yashuang Ji	
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Date:	2021-11-22		
Your Name:	Yuting Zh	Zhong	
Manuscript	Title: Surgical management in	in phyllodes tumors of the breast: a systematic review and m	neta-analysis
Manuscript	number (if known):		
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Date:	2021-11-22		
Your Name:	Nin	gning Min	
<b>Manuscript Title</b>	: Surgical managem	ent in phyllodes	tumors of the breast: a systematic review and meta-analysis
Manuscript num	ber (if known):		
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Date:	2021-11-22	
Your Name:	Huayu Hu	
Manuscript Title:	Surgical management in ph	yllodes tumors of the breast: a systematic review and meta-analysis
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Dat	Date: 2021-11-22	
You	Your Name: Qingyu Guan	
Ma	Manuscript Title: Surgical management in phyllodes tumors of the breast: a s	stematic review and meta-analysis
Ma	Manuscript number (if known):	
rela par to t rela	In the interest of transparency, we ask you to disclose all relationships/activity related to the content of your manuscript. "Related" means any relation with parties whose interests may be affected by the content of the manuscript. Disto transparency and does not necessarily indicate a bias. If you are in doubt a relationship/activity/interest, it is preferable that you do so.  The following questions apply to the author's relationships/activities/interest.	for-profit or not-for-profit third closure represents a commitment bout whether to list a
<u>ma</u>	manuscript only.	
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Date:	2021-11-22	
Your Name:	Xiru Li_	
Manuscript 1	Fitle: Surgical management in phy	llodes tumors of the breast: a systematic review and meta-analysis
Manuscript i	number (if known):	
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