

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name) Ting	2. Surname (Last Name) Zhang	3. Date 24-March-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Lei Liu; Dayun Feng
5. Manuscript Title Analysis of the clinical efficacy of liver resection combined with adjuvant microwave coagulation for patients with hepatocellular carcinoma		
6. Manuscript Identifying Number (if you know it) ATM-20-1527		

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Dr. Zhang has nothing to disclose.

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1. Given Name (First Name)
Mengmeng

2. Surname (Last Name)
Wang

3. Date
24-March-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Lei Liu; Dayun Feng

5. Manuscript Title
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4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Lei Liu; Dayun Feng
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2. Surname (Last Name)
Fan

3. Date
24-March-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Lei Liu; Dayun Feng

5. Manuscript Title
Analysis of the clinical efficacy of liver resection combined with adjuvant microwave coagulation for patients with hepatocellular carcinoma

6. Manuscript Identifying Number (if you know it)
ATM-20-1527

Section 2. The Work Under Consideration for Publication

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Dayun

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Liu

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