

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.

Identifying information.

2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes"

3. Relevant financial activities outside the submitted work.

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Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

Relationships not covered above.

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Royalties: Funds are coming in to you or your institution due to your patent

Wu 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Xingda	2. Surname (Last Name) Wu	3. Date 22-November-2020
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Zhe Liu
Manuscript TitleA rare case of duodenum perforation af report	ter biliary stenting under	endoscopic retrograde cholangiopancreatography: a case
6. Manuscript Identifying Number (if you kn ATM-20-7595	now it)	
Section 2. The Weath Under Co		
The Work Under Co	onsideration for Public	cation
any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
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of compensation) with entities as descri	bed in the instructions. Us port relationships that we	nether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by tree present during the 36 months prior to publication.
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Do you have any patents, whether plant	ned, pending or issued, br	roadly relevant to the work? Yes Vo

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Section 5.				
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	elationships or activities that readers could perceive to have influenced, or that give the appearance of ncing, what you wrote in the submitted work?			
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	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements rnals may ask authors to disclose further information about reported relationships.			
Sastian 6				
Section 6.	Disclosure Statement			
Based on the abo	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box			
Dr. Wu has nothi	ng to disclose.			

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.

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Li 1



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1. Given Name (First Name) Guichen	2. Surname (Last Name) Li	3. Date 22-November-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Zhe Liu
report		endoscopic retrograde cholangiopancreatography: a case
6. Manuscript Identifying Number (if you ki ATM-20-7595	now it)	_
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Place a check in the appropriate boxes of compensation) with entities as descr	ribed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication.
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Li 2



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liu 1



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