

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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#### 1. Identifying information.

#### 2. The work under consideration for publication.

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#### 3. Relevant financial activities outside the submitted work.

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#### 4. Intellectual Property.

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

#### 5. Relationships not covered above.

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

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Zhuhuan	2. Surname (Last Name) Song	3. Date 12-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Wei Shi, Xide Xu
5. Manuscript Title Endoscopy during neurotomy of the nervus intermedius for nervus intermedius neuralgia : a case report		
6. Manuscript Identifying Number (if you know it) ATM-20-5951		

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Are there any relevant conflicts of interest?  Yes  No

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Are there any relevant conflicts of interest?  Yes  No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

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Dr. Song has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Jian	2. Surname (Last Name) Chen	3. Date 12-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Wei Shi, Xide Xu
5. Manuscript Title Endoscopy during neurotomy of the nervus intermedius for nervus intermedius neuralgia : a case report		
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1. Given Name (First Name) Jianhong	2. Surname (Last Name) Shen	3. Date 12-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Wei Shi, Xide Xu
5. Manuscript Title Endoscopy during neurotomy of the nervus intermedius for nervus intermedius neuralgia : a case report		
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Dr. Shen has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Zhongzheng	2. Surname (Last Name) Jia	3. Date 12-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Wei Shi, Xide Xu
5. Manuscript Title Endoscopy during neurotomy of the nervus intermedius for nervus intermedius neuralgia : a case report		
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Dr. Jia has nothing to disclose.

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1. Given Name (First Name) Qinwei	2. Surname (Last Name) Wang	3. Date 12-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Wei Shi, Xide Xu
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**Royalties:** Funds are coming in to you or your institution due to your patent



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### Section 1. Identifying Information

1. Given Name (First Name)

Shichen

2. Surname (Last Name)

Jiang

3. Date

12-October-2020

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Wei Shi, Xide Xu

5. Manuscript Title

Endoscopy during neurotomy of the nervus intermedius for nervus intermedius neuralgia : a case report

6. Manuscript Identifying Number (if you know it)

ATM-20-5951

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Are there any relevant conflicts of interest?

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### Section 4. Intellectual Property -- Patents & Copyrights

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Xide

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Xu

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Wei

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Shi

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