

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.

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Section 1. Identifying Inform	nation	
1. Given Name (First Name) Hequn	2. Surname (Last Name) Chen	3. Date 30-August-2020
4. Are you the corresponding author?	Yes 🗸 No	Corresponding Author's Name Zhiyong Chen
5. Manuscript Title Percutaneous Nephrostomic Decortica	tion:a Microinvasive Surg	gery for Posterior Renal Cyst
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Do you have any patents, whether plan		



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Dr. Chen has nothing to disclose.

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Li 1



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4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Zhiyong Chen
5. Manuscript Title Percutaneous Nephrostomic Decortica	ntion:a Microinvasive Sur	gery for Posterior Renal Cyst
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Li 2



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patent

He 1



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1. Given Name (First Name) Cheng	2. Surname (Last Name) He	3. Date 30-August-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Zhiyong Chen
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patent



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1. Given Name (First Name) Huimin	2. Surname (Last Name) Zeng	3. Date 30-August-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Zhiyong Chen
5. Manuscript Title Percutaneous Nephrostomic Decortica	tion:a Microinvasive Surg	gery for Posterior Renal Cyst
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Wang 1



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1. Given Name (First Name) Weiguo	2. Surname (Last Name) Wang	3. Date 30-August-2020	
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Zhiyong Chen	
5. Manuscript Title Percutaneous Nephrostomic Decortica	ntion:a Microinvasive Sur	gery for Posterior Renal Cyst	
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