

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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Chen 1



Section 1.	Identifying Inform	ation			
1. Given Name (Fii Jing	rst Name)	2. Surnar Chen	ne (Last Name)	3. Date 05-April-2020	
4. Are you the cor	responding author?	✓ Yes	No		
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1. Given Name (First Name) Xuesong	2. Surname (Last Name) Wang	3. Date 05-April-2020					
4. Are you the corresponding author?	re you the corresponding author? Ves No						
5. Manuscript TitleCorrelation between common postope hip fracture patients6. Manuscript Identifying Number (if you known)	rative complications of prolonged bed rest and qual now it)	ity of life in hospitalized elderly					
Section 2. The Work Under C	onsideration for Publication						
Did you or your institution at any time rece any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	ive payment or services from a third party (government, co g but not limited to grants, data monitoring board, study d						
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Section 4. Intellectual Proper	rty Patents & Copyrights						
Do you have any patents, whether plan	ned, pending or issued, broadly relevant to the work	x? ☐ Yes ✓ No					

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4. Are you the cor	responding author?	✓ Yes	No	
hip fracture patie	reen common postoper		olications of prolonged bed rest and	quality of life in hospitalized elderly
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Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
	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.
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. Hua has noth	ning to disclose.

Evaluation and Feedback

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