

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Lin-Jia	2. Surname (Last Name) Zhu	3. Date 20-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Yan Ni
5. Manuscript Title A novel balanced anesthesia shortens time to emergence in patients undergoing modified radical mastectomy: a randomized prospective trial		
6. Manuscript Identifying Number (if you know it) APM-20-1774		

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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. Zhu 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) Zhen-feng	2. Surname (Last Name) Zhang	3. Date 20-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Yan Ni
5. Manuscript Title A novel balanced anesthesia shortens time to emergence in patients undergoing modified radical mastectomy: a randomized prospective trial		
6. Manuscript Identifying Number (if you know it) APM-20-1774		

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Dr. Zhang has nothing to disclose.

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1. Given Name (First Name) Si-bi	2. Surname (Last Name) Zhang	3. Date 20-October-2020
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5. Manuscript Title A novel balanced anesthesia shortens time to emergence in patients undergoing modified radical mastectomy: a randomized prospective trial		
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### Section 1. Identifying Information

1. Given Name (First Name) Xiu-hong	2. Surname (Last Name) Jiang	3. Date 20-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Yan Ni
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### Section 1. Identifying Information

1. Given Name (First Name)

Yan

2. Surname (Last Name)

Ni

3. Date

20-October-2020

4. Are you the corresponding author?

Yes  No

5. Manuscript Title

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