

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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### Section 1. Identifying Information

1. Given Name (First Name) Hui	2. Surname (Last Name) Wu	3. Date 05-February-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jinyao Li
5. Manuscript Title Effect analysis of embracing breast milk sucking to relieve pain of neonatal heel blood sampling		
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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Jinyu

2. Surname (Last Name)

Zhang

3. Date

05-February-2021

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Jinyao Li

5. Manuscript Title

Effect analysis of embracing breast milk sucking to relieve pain of neonatal heel blood sampling

6. Manuscript Identifying Number (if you know it)

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1. Given Name (First Name) Qipei	2. Surname (Last Name) Ding	3. Date 05-February-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jinyao Li
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1. Given Name (First Name) Shengfeng	2. Surname (Last Name) Wang	3. Date 05-February-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jinyao Li
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Jinyao

2. Surname (Last Name)

Li

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05-February-2021

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