

## 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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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Hongbo	2. Surname (Last Name) Huo	3. Date 02-March-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Lina Cui
5. Manuscript Title The application of personalized rehabilitation exercises in the postoperative rehabilitation of breast cancer patients		
6. Manuscript Identifying Number (if you know it)		

### Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?  Yes  No

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Dr. Huo 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)

Qian

2. Surname (Last Name)

Wang

3. Date

02-March-2021

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Lina Cui

5. Manuscript Title

The application of personalized rehabilitation exercises in the postoperative rehabilitation of breast cancer patients

6. Manuscript Identifying Number (if you know it)

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Dr. Wang has nothing to disclose.

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1. Given Name (First Name) Shaoguang	2. Surname (Last Name) Zhou	3. Date 02-March-2021
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Lina

2. Surname (Last Name)

Cui

3. Date

02-March-2021

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Yes  No

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