

## ICMJE DISCLOSURE FORM

Date: May 6<sup>th</sup>, 2021

Your Name: Xiaolan Chen

Manuscript Title: The incidence, risk factors, and prognosis of postoperative hyperbilirubinemia after cardiac surgery: a systematic review and meta analysis

Manuscript number (if known): APM-21-410

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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**Please summarize the above conflict of interest in the following box:**

None

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Date: May 6<sup>th</sup>, 2021

Your Name: Ming Bai

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Date: May 6<sup>th</sup>, 2021

Your Name: Wei Zhang

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Date: May 6<sup>th</sup>, 2021

Your Name: Shiren Sun

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Date: May 6<sup>th</sup>, 2021

Your Name: Xiangmei Chen

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