

JCMJE DISCLOSURE FORM

Date: 10. Aug. 2021

Your Name: Yamin Yan

Manuscript Title: Postoperative cytokine levels and their predictive value in critical patients after major abdominal surgery: a retrospective cohort study

Manuscript number (if known): _____

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.

The following questions apply to the author's relationships/activities/interests as they relate to the current manuscript only.

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In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

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

None

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I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: 10. Aug. 2021

Your Name: Peili Jin

Manuscript Title: Postoperative cytokine levels and their predictive value in critical patients after major abdominal surgery: a retrospective cohort study

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 10. Aug. 2021

Your Name: Jing Jing Lu

Manuscript Title: Postoperative cytokine levels and their predictive value in critical patients after major abdominal surgery: a retrospective cohort study

Manuscript number (if known): _____

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CMJE DISCLOSURE FORM

Date: 11. AUG 2017

Your Name: Dan Dan Cheng

Manuscript Title: Postoperative cytokine levels and their predictive value in critical patients after major abdominal surgery: a retrospective cohort study

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 10. Aug 2021
 Your Name: Jia Feng Xu
 Manuscript Title: Postoperative cytokine levels and their predictive value in critical patients after major abdominal surgery: a retrospective cohort study
 Manuscript number (if known): _____

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X

CMJE DISCLOSURE FORM

Date: 11. Aug 2021

Your Name: Jiawen Yuan

Manuscript Title: Postoperative cytokine levels and their predictive value in critical patients after major abdominal surgery: a retrospective cohort study

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 11. Aug 2021

Your Name: Shenghong Yu

Manuscript Title: Postoperative cytokine levels and their predictive value in critical patients after major abdominal surgery: a retrospective cohort study

Manuscript number (if known): _____

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JGIMJE DISCLOSURE FORM

Date: 11.04.2021

Your Name: Yan Du

Manuscript Title: Postoperative cytokine levels and their predictive value in critical patients after major abdominal surgery: a retrospective cohort study

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