

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name) Xingling	2. Surname (Last Name) Deng	3. Date 15-February-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Chunmei Du
5. Manuscript Title Analysis of the handling of ophthalmic surgical instruments in hospitals		
6. Manuscript Identifying Number (if you know it)		

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Section 1. Identifying Information

1. Given Name (First Name)
Chunmei

2. Surname (Last Name)
Du

3. Date
15-February-2019

4. Are you the corresponding author? Yes No

5. Manuscript Title
Analysis of the handling of ophthalmic surgical instruments in hospitals

6. Manuscript Identifying Number (if you know it)

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1. Given Name (First Name) Jiehui	2. Surname (Last Name) Huang	3. Date 15-February-2019
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Wenyuan

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Wang

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Corresponding Author's Name
Chunmei Du

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