

ICMJE DISCLOSURE FORM

Date: 2022/4/14

Your Name: Xining Zhao

Manuscript Title: Association between preoperative nutritional status, inflammation, and intestinal permeability in elderly patients undergoing gastrectomy: A prospective 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.

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Time frame: past 36 months			
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3	Royalties or licenses	__X__ None	
4	Consulting fees	__X__ None	

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

None.

Please place an "X" next to the following statement to indicate your agreement:

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Date: 2022/4/14

Your Name: Ying Wang

Manuscript Title: Association between preoperative nutritional status, inflammation, and intestinal permeability in elderly patients undergoing gastrectomy: A prospective cohort study

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Your Name: Yuying Yang

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Your Name: Yan Pan

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Your Name: Jie Liu

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