Date:	2023/4/21							
Your Name:	Zetian Chen							
Manuscript Title:	A case series of 10	patients undergone linear cutter/stapler guiding device-led overlapped						
esophagojejunostomya : a preliminary 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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		Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution)
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  No time limit for this item.	XNone	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

	Payment or honoraria for	XNone	
	ectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
	Payment for expert	XNone	
t	cestimony		
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	Support for attending meetings and/or travel	XNone	
	Patents planned, issued or	XNone	
k	pending		
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	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
	eadership or fiduciary role n other board, society,	XNone	
	committee or advocacy		
	group, paid or unpaid		
	Stock or stock options	X None	
11 0	Stock of Stock options		
12 F	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
S	services		
13 (	Other financial or	XNone	
r	non-financial interests		
Pleas	se summarize the above co	nflict of interest in the follo	wing box:
No	one		

Date:	2	023/4/	21								
Your Name:_		Don	g Wang								
Manuscript	Title:	A case	series	of 10	patients	undergone	linear	cutter/stapler	guiding	device-led	overlapped
esophagojejunostomya : a preliminary study											
Manuscript i	number (if k	(nown):									_

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3	Royalties or licenses	XNone
4	Consulting fees	XNone

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending	X None	
	meetings and/or travel		
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8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	X None	
5	Safety Monitoring Board or	XNone	
	Advisory Board		
4.0	-		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
12		V None	
13	Other financial or non-financial interests	XNone	
	non-imancial interests		
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Date:	2	2023/4/2	21								
Your Name:_		Qun	Zhao							_	
Manuscript	Title:	A case	series	of 10	patients	undergone	linear	cutter/stapler	guiding	device-led	overlapped
esophagojejunostomya : a preliminary study											
Manuscript (	number (if l	known):									_

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	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending	X None	
	meetings and/or travel		
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8	Patents planned, issued or	XNone	
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9	Participation on a Data	X None	
5	Safety Monitoring Board or	XNone	
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10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
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13	Other financial or non-financial interests	XNone	
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Ple	ease summarize the above co	nflict of interest in the follo	wing box:
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Date:		2023/4/	21								
Your Name:_		Peig	ang Yan	g							
Manuscript	Title:	A case	series	of 1	patients	undergone	linear	cutter/stapler	guiding	device-led	overlapped
esophagojejunostomya : a preliminary study											
Manuscript i	number (if	known):									_

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	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending	X None	
	meetings and/or travel		
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8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	X None	
5	Safety Monitoring Board or	XNone	
	Advisory Board		
4.0	-		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
12		V None	
13	Other financial or non-financial interests	XNone	
	non-imancial interests		
Ple	ease summarize the above co	nflict of interest in the follo	wing box:
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	None		

Date:		_2023/4	1/21									
Your Name:		Pir	g-an Din	g								
Manuscript	Title:	_A cas	e series	of	10	patients	undergone	linear	cutter/stapler	guiding	device-led	overlapped
esophagojej	unostomy	/a:apr	eliminary	stud	yt							
Manuscript	number (i	if knowr	n):									_

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	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending	X None	
	meetings and/or travel		
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8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	X None	
5	Safety Monitoring Board or	XNone	
	Advisory Board		
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10	Leadership or fiduciary role	XNone	
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	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
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13	Other financial or non-financial interests	XNone	
	non-imancial interests		
Ple	ease summarize the above co	nflict of interest in the follo	wing box:
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Date:	2	023/4/	21								
Your Name:_		Haili	ang Far								
Manuscript	Title:	A case	series	of 10	) patients	undergone	linear	cutter/stapler	guiding	device-led	overlapped
esophagojej	unostomya	: a preli	minary	study_							
Manuscript i	number (if k	(nown):									_

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	testimony		
7	Support for attending	X None	
	meetings and/or travel		
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8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	X None	
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10	Leadership or fiduciary role	XNone	
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12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
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13	Other financial or non-financial interests	XNone	
	non-imancial interests		
Ple	ease summarize the above co	nflict of interest in the follo	wing box:
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	None		

Date:	20	)23/4/	21									
Your Name:_		Tian:	xiang D	ong_								
Manuscript	Title:A	case	series	of	10	patients	undergone	linear	cutter/stapler	guiding	device-led	overlapped
esophagojej	unostomya:	a preli	minary	stuc	dy							
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3	Royalties or licenses	XNone
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5	Payment or honoraria for	xNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
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	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending	X None	
	meetings and/or travel		
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8	Patents planned, issued or	XNone	
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9	Participation on a Data	X None	
3	Safety Monitoring Board or		
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10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
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10	non-financial interests		
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Ple	ase summarize the above co	iffict of interest in the follo	wing box:
	None		

Date:	2	023/4/21								
Your Name:_		Zijing Liu								
Manuscript	Title:	A case seri	es of 10	patients	undergone	linear	cutter/stapler	guiding	device-led	overlapped
esophagojej	unostomya	: a prelimina	ary study_							
Manuscript (	number (if k	(nown):								<u> </u>

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	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending	X None	
	meetings and/or travel		
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8	Patents planned, issued or	XNone	
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9	Participation on a Data	X None	
3	Safety Monitoring Board or		
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10	Leadership or fiduciary role	XNone	
	in other board, society,		
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	group, paid or unpaid		
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Date:	2	023/4/2	21								
Your Name:_		Xin Y	ang								
Manuscript	Title:	A case	series	of 10	patients	undergone	linear	cutter/stapler	guiding	device-led	overlapped
esophagojej	unostomya	: a preli	minary	study_							
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5	Payment or honoraria for	XNone	
	lectures, presentations,		
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6	Payment for expert	XNone	
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7	Support for attending	X None	
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8	Patents planned, issued or	XNone	
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9	Participation on a Data	X None	
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10	Leadership or fiduciary role	XNone	
	in other board, society,		
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	group, paid or unpaid		
11	Stock or stock options	XNone	
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	materials, drugs, medical		
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Date:		_2023/4	/21									
Your Name:_		Lei	Ren									
Manuscript	Title:	_A case	series	of	10	patients	undergone	linear	cutter/stapler	guiding	device-led	overlapped
esophagojej	unostomy	a : a pre	liminary	stud	y							
Manuscript	number (i	f known	):									_

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	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
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6	Payment for expert	XNone	
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7	Support for attending	X None	
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	Safety Monitoring Board or		
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11	Stock or stock options	XNone	
12	Receipt of equipment,	X None	
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rie	ease summarize the above co	mict of interest in the long	JWIIIE DOX.
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Date:	2023/4/21
Your Name:	Yong Li
Manuscript Title:	A case series of 10 patients undergone linear cutter/stapler guiding device-led overlapped
esophagojejunosto:	nya : a preliminary study
Manuscript number	(if known):
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	processing charges, etc.)  No time limit for this item.		
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		Time frame: past	36 months
2	Grants or contracts from	XNone	
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4	Consulting fees	XNone	

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5	Payment or honoraria for	XNone	
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	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
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8	Patents planned, issued or	XNone	
	pending		
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10	Leadership or fiduciary role	XNone	
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12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
Dlas	ise summarize the above co	nflict of interest in the fo	llowing hov

None		