

Instructions

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1. Given Name (F Xiaosang	irst Name)	2. Surname Chen	(Last Name)		3. Date 26-September-2020
4. Are you the co	rresponding author?	Yes	✔ No	Corresponding Author's Na Yaxing Shen	ime
5. Manuscript Titl Transcervical Mi		agectomy: He	emodynamic	Study on an Animal Model	
6. Manuscript Ide	ntifying Number (if you k	now it)			
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Dr. Chen has nothing to disclose.

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Section 1. Identifying Information 1. Given Name (First Name) 2. Surname (Last Name) 3. Date Shuanggen Xue 26-September-2020
4. Are you the corresponding author? Yes Image: No Corresponding Author's Name Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes
5. Manuscript Title Transcervical Minimally Invasive Esophagectomy: Hemodynamic Study on an Animal Model
6. Manuscript Identifying Number (if you know it)
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Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?
Are there any relevant conflicts of interest? Yes Ves
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Dr. Xue has nothing to disclose.

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The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

1. Identifying information.

2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

3. Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

Relationships not covered above.

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Definitions.

Entity: government agency, foundation, commercial sponsor, academic institution, etc.

Grant: A grant from an entity, generally [but not always] paid to your organization

Personal Fees: Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting , lectures, speakers bureaus, expert testimony, employment, or other affiliations

Non-Financial Support: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

Other: Anything not covered under the previous three boxes Pending: The patent has been filed but not issued Issued: The patent has been issued by the agency Licensed: The patent has been licensed to an entity, whether earning royalties or not Royalties: Funds are coming in to you or your institution due to your



Section 1. Identifyin	g Information						
1. Given Name (First Name) Yaxing	2. Surname (Last Name) Shen	3. Date 26-September-2020					
4. Are you the corresponding au	thor? 🖌 Yes 🗌 No						
5. Manuscript Title Transcervical Minimally Invas	ve Esophagectomy: Hemodynamic Study on a	n Animal Model					
6. Manuscript Identifying Number	er (if you know it)						
Section 2. The Work	Under Consideration for Publication						
Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?							
Are there any relevant conflic	s of interest? 🗌 Yes 🖌 No						
Contion 2							
Section 3. Relevant f	inancial activities outside the submitted	l work.					
of compensation) with entitie clicking the "Add +" box. You	s as described in the instructions. Use one line should report relationships that were present	have financial relationships (regardless of amount for each entity; add as many lines as you need by during the 36 months prior to publication .					
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? 🗌 Yes 🖌 No



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Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Shen has nothing to disclose.

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Section 1.				
Identif	fying Information			
1. Given Name (First Name) Lijie	2. Surna Tan	me (Last Name)		3. Date 26-September-2020
4. Are you the correspondin	g author? Yes	Yes No Corresponding Author's N Yaxing Shen		me
5. Manuscript Title Transcervical Minimally In	wasive Esophagectomy	Hemodynamic	Study on an Animal Model	
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Section 2. The Wo	ork Under Considera	tion for Publ	ication	
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Are there any relevant cor	nflicts of interest?	Yes 🖌 No		
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Are there any relevant cor	·	Yes 🖌 No		

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?		Yes	✓ N	٩٥
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