

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

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

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Royalties: Funds are coming in to you or your institution due to your patent

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Section 1. Identifying Information

1. Given Name (First Name) Wenbin	2. Surname (Last Name) Jiang	3. Date 28-May-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Xiao Liang
5. Manuscript Title Enhanced Recovery After Surgery (ERAS) Program in Elderly Patients Undergoing Laparoscopic Hepatectomy: A Retrospective Cohort Study		
6. Manuscript Identifying Number (if you know it) TCR-19-2884		

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Are there any relevant conflicts of interest? Yes No

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Dr. Jiang has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Qijiang	2. Surname (Last Name) Mao	3. Date 28-May-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Xiao Liang
5. Manuscript Title Enhanced Recovery After Surgery (ERAS) Program in Elderly Patients Undergoing Laparoscopic Hepatectomy: A Retrospective Cohort Study		
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1. Given Name (First Name) Yangyang	2. Surname (Last Name) Xie	3. Date 28-May-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Xiao Liang
5. Manuscript Title Enhanced Recovery After Surgery (ERAS) Program in Elderly Patients Undergoing Laparoscopic Hepatectomy: A Retrospective Cohort Study		
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1. Given Name (First Name) Hanning	2. Surname (Last Name) Ying	3. Date 28-May-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Xiao Liang
5. Manuscript Title Enhanced Recovery After Surgery (ERAS) Program in Elderly Patients Undergoing Laparoscopic Hepatectomy: A Retrospective Cohort Study		
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Huiqing

2. Surname (Last Name)
Ge

3. Date
28-May-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Xiao Liang

5. Manuscript Title
Enhanced Recovery After Surgery (ERAS) Program in Elderly Patients Undergoing Laparoscopic Hepatectomy: A Retrospective Cohort Study

6. Manuscript Identifying Number (if you know it)
TCR-19-2884

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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Ge has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Lijun	2. Surname (Last Name) Feng	3. Date 28-May-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Xiao Liang
5. Manuscript Title Enhanced Recovery After Surgery (ERAS) Program in Elderly Patients Undergoing Laparoscopic Hepatectomy: A Retrospective Cohort Study		
6. Manuscript Identifying Number (if you know it) TCR-19-2884		

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Hui	2. Surname (Last Name) Liu	3. Date 28-May-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Xiao Liang
5. Manuscript Title Enhanced Recovery After Surgery (ERAS) Program in Elderly Patients Undergoing Laparoscopic Hepatectomy: A Retrospective Cohort Study		
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Jianhua

2. Surname (Last Name)

Li

3. Date

28-May-2020

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

Xiao Liang

5. Manuscript Title

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