

Instructions

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.

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Ni 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Zhizhan	2. Surname (Last Name) Ni	3. Date 13-February-2021
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Qi Huang
5. Manuscript Title Sclerosing Encapsulating Peritonitis as Mesothelioma: A Case Report and Revi		Obstruction after the Treatment of Peritoneal
6. Manuscript Identifying Number (if you k Reference ID: TCR-20-3259	now it)	
Section 2		
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Chen 1



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4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Qi Huang
			Obstruction after the Treatment of Peritoneal
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Wang 1



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4. Are you the corresponding	g author? Yes	✓ No	Corresponding Author's Nam Qi Huang	ne
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