

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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

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Section 1. Identifying Information

1. Given Name (First Name) Yifeng	2. Surname (Last Name) Sun	3. Date 02-July-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Zhigang Li
5. Manuscript Title Evaluation and patient selection for minimally invasive esophagectomy		
6. Manuscript Identifying Number (if you know it) SHC-2018-28		

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.)?

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1. Given Name (First Name) Haiyong	2. Surname (Last Name) Gu	3. Date 02-July-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Zhigang Li
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Xufeng

2. Surname (Last Name)

Guo

3. Date

02-July-2018

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Zhigang Li

5. Manuscript Title

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Rong	2. Surname (Last Name) Hua	3. Date 02-July-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Zhigang Li
5. Manuscript Title Evaluation and patient selection for minimally invasive esophagectomy		
6. Manuscript Identifying Number (if you know it) SHC-2018-28		

Section 2. The Work Under Consideration for Publication

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Bo	2. Surname (Last Name) Ye	3. Date 02-July-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Zhigang Li
5. Manuscript Title Evaluation and patient selection for minimally invasive esophagectomy		
6. Manuscript Identifying Number (if you know it) SHC-2018-28		

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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Ye 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)
Teng

2. Surname (Last Name)
Mao

3. Date
02-July-2018

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Zhigang Li

5. Manuscript Title
Evaluation and patient selection for minimally invasive esophagectomy

6. Manuscript Identifying Number (if you know it)
SHC-2018-28

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Zhigang

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Li

3. Date

02-July-2018

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