

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name)
Xufeng

2. Surname (Last Name)
Guo

3. Date
01-June-2018

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Zhigang Li

5. Manuscript Title
ERAS prior to minimally invasive esophagectomy

6. Manuscript Identifying Number (if you know it)
SHC-2018-27

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Dr. Guo has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Chun	2. Surname (Last Name) Ding	3. Date 01-June-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 ERAS prior to minimally invasive esophagectomy		
6. Manuscript Identifying Number (if you know it) SHC-2018-27		

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Section 1. Identifying Information

1. Given Name (First Name) Chenguang	2. Surname (Last Name) Luo	3. Date 01-June-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 ERAS prior to minimally invasive esophagectomy		
6. Manuscript Identifying Number (if you know it) SHC-2018-27		

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1. Given Name (First Name) Yu	2. Surname (Last Name) Yang	3. Date 01-June-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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5. Manuscript Title ERAS prior to minimally invasive esophagectomy		
6. Manuscript Identifying Number (if you know it) SHC-2018-27		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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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

ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Hua 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) Bo	2. Surname (Last Name) Ye	3. Date 01-June-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 ERAS prior to minimally invasive esophagectomy		
6. Manuscript Identifying Number (if you know it) SHC-2018-27		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

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) Haiyong	2. Surname (Last Name) Gu	3. Date 01-June-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 ERAS prior to minimally invasive esophagectomy		
6. Manuscript Identifying Number (if you know it) SHC-2018-27		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Gu 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) Yifeng	2. Surname (Last Name) Sun	3. Date 01-June-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 ERAS prior to minimally invasive esophagectomy		
6. Manuscript Identifying Number (if you know it) SHC-2018-27		

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Sun 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
01-June-2018

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Zhigang Li

5. Manuscript Title
ERAS prior to minimally invasive esophagectomy

6. Manuscript Identifying Number (if you know it)
SHC-2018-27

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Dr. Mao 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)

Zhigang

2. Surname (Last Name)

Li

3. Date

01-June-2018

4. Are you the corresponding author?

Yes No

5. Manuscript Title

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