

## 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.

#### 5. Relationships not covered above.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Yiyang

2. Surname (Last Name)  
Wang

3. Date  
06-January-2021

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name  
Wentao Fang

5. Manuscript Title  
Annual report of Thoracic Surgery Service at Shanghai Chest Hospital in 2019

6. Manuscript Identifying Number (if you know it)

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Dr. Wang 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) Zhitaio	2. Surname (Last Name) Gu	3. Date 06-January-2021
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Wentao Fang
5. Manuscript Title Annual report of Thoracic Surgery Service at Shanghai Chest Hospital in 2019		
6. Manuscript Identifying Number (if you know it)  		

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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1. Given Name (First Name) Feng	2. Surname (Last Name) Yao	3. Date 06-January-2021
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Wentao Fang
5. Manuscript Title Annual report of Thoracic Surgery Service at Shanghai Chest Hospital in 2019		
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Dr. Yao has nothing to disclose.

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1. Given Name (First Name) Teng	2. Surname (Last Name) Mao	3. Date 06-January-2021
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Wentao Fang
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Dr. Mao has nothing to disclose.

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Rui

2. Surname (Last Name)

Wang

3. Date

06-January-2021

4. Are you the corresponding author?

☐

Yes

☒

No

Corresponding Author's Name

Wentao Fang

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**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 patent



## 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 06-January-2021
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Wentao Fang
5. Manuscript Title Annual report of Thoracic Surgery Service at Shanghai Chest Hospital in 2019		
6. Manuscript Identifying Number (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 conflicts of interest? ☐ Yes ☒ No

### Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were **present during the 36 months prior to publication**.

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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### Section 6. Disclosure Statement

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

Dr. Sun has nothing to disclose.

### Evaluation and Feedback

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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

06-January-2021

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Wentao Fang

5. Manuscript Title

Annual report of Thoracic Surgery Service at Shanghai Chest Hospital in 2019

6. Manuscript Identifying Number (if you know it)

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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

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

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Dr. Li 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)

Jun

2. Surname (Last Name)

Yang

3. Date

06-January-2021

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Wentao Fang

5. Manuscript Title

Annual report of Thoracic Surgery Service at Shanghai Chest Hospital in 2019

6. Manuscript Identifying Number (if you know it)

### 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

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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### Section 5. Relationships not covered above

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### Section 6. Disclosure Statement

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Dr. Yang has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Qiang	2. Surname (Last Name) Tan	3. Date 06-January-2021
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Wentao Fang
5. Manuscript Title Annual report of Thoracic Surgery Service at Shanghai Chest Hospital in 2019		
6. Manuscript Identifying Number (if you know it)  		

### 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

---

### Section 5. Relationships not covered above

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### Section 6. Disclosure Statement

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Dr. Tan has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Qingquan	2. Surname (Last Name) Luo	3. Date 06-January-2021
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Wentao Fang
5. Manuscript Title Annual report of Thoracic Surgery Service at Shanghai Chest Hospital in 2019		
6. Manuscript Identifying Number (if you know it)  		

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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

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Luo 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)  
Wentao

2. Surname (Last Name)  
Fang

3. Date  
06-January-2021

4. Are you the corresponding author? ☒ Yes ☐ No

5. Manuscript Title  
Annual report of Thoracic Surgery Service at Shanghai Chest Hospital in 2019

6. Manuscript Identifying Number (if you know it)

### 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

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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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### Section 5. Relationships not covered above

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- ☒ No other relationships/conditions/circumstances that present a potential conflict of interest

At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

### Section 6. Disclosure Statement

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

Dr. Fang has nothing to disclose.

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