

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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earning royalties or not

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

Shao 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Xiao-Dong	2. Surname (Last Name) Shao	3. Date 20-September-2019
4. Are you the corresponding author?	✓ Yes No	
length of a scope matter?—a systemati 6. Manuscript Identifying Number (if you ki	•	pancreatography: does the
Section 2. The Work Under C	onsideration for Publication	
any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of inter-	eive payment or services from a third party (government, cog g but not limited to grants, data monitoring board, study d est? Yes V No	
Section 3. Relevant financial	activities outside the submitted work.	
of compensation) with entities as descr	in the table to indicate whether you have financial refibed in the instructions. Use one line for each entity; port relationships that were present during the 36 r est?	add as many lines as you need by
Section 4. Intellectual Prope	rty Patents & Copyrights	
Do you have any patents, whether plan	ned, pending or issued, broadly relevant to the work	?

Shao 2



Section 5.				
	Relationships not covered above			
	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?			
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✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest			
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements rnals may ask authors to disclose further information about reported relationships.			
Section 6.	Disclosure Statement			
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Dr. Shao has not	hing to disclose.			

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Qi 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fii Xing-Shun	rst Name)	2. Surname (Last Name) Qi		3. Date 20-September-2019
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Nar	me
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6. Manuscript Ider	ntifying Number (if you kr	now it)		
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Section 2.	The Work Under Co	onsideration for Public	cation	
any aspect of the s statistical analysis,	ubmitted work (including	but not limited to grants, da	a third party (government, cor ita monitoring board, study de	mmercial, private foundation, etc.) for sign, manuscript preparation,
Section 3.	Relevant financial	activities outside the s	submitted work.	
of compensation clicking the "Add	the appropriate boxes i) with entities as descri	n the table to indicate wh bed in the instructions. Us port relationships that we	ether you have financial rela se one line for each entity; a	ationships (regardless of amount odd as many lines as you need by nonths prior to publication.
Section 4.	Intellectual Proper	ty Patents & Copyri	ghts	
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work?	Yes 🗸 No

Qi 2



Section 5.	
Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of ncing, what you wrote in the submitted work?
✓ Yes, the follow	wing relationships/conditions/circumstances are present (explain below):
No other rela	tionships/conditions/circumstances that present a potential conflict of interest
l serves as an unp	paid Editors-in-Chief of AME Medical Journal
	nuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements nals may ask authors to disclose further information about reported relationships.
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Dr. Qi reports tha	at he serves as an unpaid Editors-in-Chief of AME Medical Journal.

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Wang 1



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4. Are you the corres	sponding author?	Yes ✓ No	Corresponding Author's Nar Xiao-Dong Shao	me
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6. Manuscript Identi	fying Number (if you kno	ow it)		
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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 Vo				
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Guo 1



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1. Given Name (First Name) Xiao-Zhong	2. Surname (Last Name) Guo	3. Date 20-September-2019	
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Xiao-Dong Shao	
5. Manuscript Title Performance of short type double balength of a scope matter?—a system	-	opic retrograde cholangiopancreatography: does the s	
6. Manuscript Identifying Number (if you	ı know it)		
Section 2. The Work Under	Consideration for Public	cation	
	ling but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,	
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Guo 2



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