ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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### Identifying Information

<table>
<thead>
<tr>
<th>1. Given Name (First Name)</th>
<th>2. Surname (Last Name)</th>
<th>3. Date</th>
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<tr>
<td>Wenbin</td>
<td>Jiang</td>
<td>28-May-2020</td>
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<th>4. Are you the corresponding author?</th>
<th>✔ No</th>
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<tr>
<td>Corresponding Author’s Name</td>
<td>Xiao Liang</td>
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<th>5. Manuscript Title</th>
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Are there any relevant conflicts of interest?  ✔ No

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Dr. Jiang has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)  Qijiang
2. Surname (Last Name)    Mao
3. Date                    28-May-2020
4. Are you the corresponding author?  No
   Corresponding Author’s Name  Xiao Liang
5. Manuscript Title
   Enhanced Recovery After Surgery (ERAS) Program in Elderly Patients Undergoing Laparoscopic Hepatectomy: A Retrospective Cohort Study
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Dr. Mao has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Yangyang

2. Surname (Last Name)  
   Xie

3. Date  
   28-May-2020

4. Are you the corresponding author?  
   ✔ No

   Corresponding Author’s Name
   Xiao Liang

5. Manuscript Title  
   Enhanced Recovery After Surgery (ERAS) Program in Elderly Patients Undergoing Laparoscopic Hepatectomy: A Retrospective Cohort Study

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2. Surname (Last Name)  
   Ying

3. Date  
   28-May-2020

4. Are you the corresponding author?  
   ☑ No

   Corresponding Author’s Name  
   Xiao Liang

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Dr. Ying has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  Hongxia
2. Surname (Last Name)      Xu
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4. Are you the corresponding author?    ☐ Yes    ✅ No

Corresponding Author’s Name
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1. **Given Name (First Name)**  
   Huiqing  
2. **Surname (Last Name)**  
   Ge  
3. **Date**  
   28-May-2020  
4. **Are you the corresponding author?**  
   [ ] Yes  
   [x] No  
   **Corresponding Author’s Name**  
   Xiao Liang  
5. **Manuscript Title**  
   Enhanced Recovery After Surgery (ERAS) Program in Elderly Patients Undergoing Laparoscopic Hepatectomy: A Retrospective Cohort Study  
6. **Manuscript Identifying Number (if you know it)**  
   TCR-19-2884

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[ ] No

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Lijun
2. Surname (Last Name)  
Feng
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<table>
<thead>
<tr>
<th>1. Given Name (First Name)</th>
<th>Hui</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Surname (Last Name)</td>
<td>Liu</td>
</tr>
<tr>
<td>3. Date</td>
<td>28-May-2020</td>
</tr>
</tbody>
</table>

4. Are you the corresponding author? [ ] Yes [x] No

Corresponding Author’s Name: Xiao Liang

5. Manuscript Title
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Section 1. Identifying Information

1. Given Name (First Name)  Jianhua
2. Surname (Last Name)  Li
3. Date  28-May-2020
4. Are you the corresponding author?  Yes  No
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5. Manuscript Title
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Xiao

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Liang

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