ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name)  
Haibing

2. Surname (Last Name)  
Ding

3. Date  
24-November-2020

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

Corresponding Author’s Name  
Haitao Ma

5. Manuscript Title  
Effects of enteral nutrition support combined with enhanced recovery after surgery on the nutritional status, immune function, and prognosis of patients with esophageal cancer after Ivor-Lewis operation

6. Manuscript Identifying Number (if you know it)  
JTD-20-3410

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Royalties: Funds are coming in to you or your institution due to your patent
### Section 1. Identifying Information

1. **Given Name (First Name)**  Jin  
2. **Surname (Last Name)**  Xu  
3. **Date**  24-November-2020  
4. **Are you the corresponding author?**  ✔ No  
   **Corresponding Author’s Name**  Haitao Ma  
5. **Manuscript Title**  Effects of enteral nutrition support combined with enhanced recovery after surgery on the nutritional status, immune function, and prognosis of patients with esophageal cancer after Ivor-Lewis operation  
6. **Manuscript Identifying Number (if you know it)**  JTD-20-3410

### Section 2. The Work Under Consideration for Publication

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1. Given Name (First Name)
   - Jijun

2. Surname (Last Name)
   - You

3. Date
   - 24-October-2020

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

   Corresponding Author’s Name
   - Haitao Ma

5. Manuscript Title
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   Haifeng

2. Surname (Last Name)  
   Qin

3. Date  
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   [X] No

   Corresponding Author’s Name  
   Haitao Ma

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