ICMJE Form for Disclosure of Potential Conflicts of Interest

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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4. **Intellectual Property.**

   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)  
Fang

2. Surname (Last Name)  
Lv

3. Date  
25-August-2020

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

Corresponding Author's Name  
Shugeng Gao

5. Manuscript Title  
Lobectomy vs. sublobectomy for stage I non-small-cell lung cancer: a meta-analysis

6. Manuscript Identifying Number (if you know it)  
ATM-20-460-R1

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Dr. Lv has nothing to disclose.

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## Identifying Information

1. **Given Name (First Name)**  
   Bing

2. **Surname (Last Name)**  
   Wang

3. **Date**  
   25-August-2020

4. **Are you the corresponding author?**  
   - [ ] Yes  
   - [x] No  
   **Corresponding Author's Name**  
   Shugeng Gao

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<thead>
<tr>
<th>1. Given Name (First Name)</th>
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<tbody>
<tr>
<td>2. Surname (Last Name)</td>
<td>Xue</td>
</tr>
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4. Are you the corresponding author?  
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   - [x] No  

4.对应的作者姓名
   - Shugeng Gao

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   Shugeng

2. Surname (Last Name)  
   Gao

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