ICMJE Form for Disclosure of Potential Conflicts of Interest

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.

1. Identifying information.

2. The work under consideration for publication.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
Wei

2. Surname (Last Name)  
Sun

3. Date  
06-June-2020

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

Corresponding Author's Name  
Da-Li Sun

5. Manuscript Title  
Consensus and Controversy among Severe Pancreatitis Surgery Guidelines: A Guideline Evaluation Based on the AGREE II Tool

6. Manuscript Identifying Number (if you know it)  
GS-20-444

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Dr. Sun has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Li-Ya  
2. Surname (Last Name) An  
3. Date 06-June-2020

4. Are you the corresponding author?  
   - Yes  
   - No  
   ✔

5. Manuscript Title  
   Consensus and Controversy among Severe Pancreatitis Surgery Guidelines: A Guideline Evaluation Based on the AGREE II Tool

6. Manuscript Identifying Number (if you know it)  
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Dr. An has nothing to disclose.

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<tbody>
<tr>
<td>Xue-Dong</td>
<td>Bao</td>
<td>06-June-2020</td>
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4. Are you the corresponding author? [ ] Yes [✓] No

<table>
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Dr. Bao has nothing to disclose.

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1. Given Name (First Name)  
   Yu-Xing
2. Surname (Last Name)  
   Qi
3. Date  
   06-June-2020
4. Are you the corresponding author?  
   ✔ No
Corresponding Author's Name  
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<td>Yang</td>
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Corresponding Author's Name
Da-li Sun

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Dr. Yang has nothing to disclose.

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Rui
2. Surname (Last Name)  
   Li
3. Date  
   06-June-2020
4. Are you the corresponding author?  
   ✔ Yes  
   No

5. Manuscript Title  
   Consensus and Controversy among Severe Pancreatitis Surgery Guidelines: A Guideline Evaluation Based on the AGREE II Tool
6. Manuscript Identifying Number (if you know it)  
   GS-20-444

**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

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   No

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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Dr. Li has nothing to disclose.

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1. **Identifying information.**

2. **The work under consideration for publication.**

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### Section 1. Identifying Information

1. Given Name (First Name)  
   Su-Yun

2. Surname (Last Name)  
   Zheng

3. Date  
   06-June-2020

4. Are you the corresponding author?  
   ✔ Yes  
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<table>
<thead>
<tr>
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<th>2. Surname (Last Name)</th>
<th>3. Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Da-Li</td>
<td>Sun</td>
<td>06-June-2020</td>
</tr>
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</table>

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- No

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