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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## Section 1. Identifying Information

1. **Given Name (First Name)**
   - Wangang

2. **Surname (Last Name)**
   - Ren

3. **Date**
   - 16-April-2020

4. **Are you the corresponding author?**
   - Yes ☑

   **Corresponding Author’s Name**
   - Zhongmin Peng

5. **Manuscript Title**
   - Prolonged endotracheal intubation: a feasible option for tracheomalacia after retrosternal goitre surgery

6. **Manuscript Identifying Number (if you know it)**
   - APM-19-552

## 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 ☑

## Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest?

- Yes ☐
- No ☑

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- Yes ☐
- No ☑
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Dr. Ren has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)  
   Xingchen

2. Surname (Last Name)  
   Shang

3. Date  
   16-April-2020

4. Are you the corresponding author?  
   Yes ☑ No

Corresponding Author's Name  
Zhongmin Peng

5. Manuscript Title  
Prolonged endotracheal intubation: a feasible option for tracheomalacia after retrosternal goitre surgery.

6. Manuscript Identifying Number (if you know it)  
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Section 2. The Work Under Consideration for Publication

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☐ Yes ☑ No

Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Shang has nothing to disclose.

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## Section 1. Identifying Information

1. Given Name (First Name)  
   Honghao  

2. Surname (Last Name)  
   Fu  

3. Date  
   16-April-2020  

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

   Corresponding Author’s Name  
   Zhongmin Peng

5. Manuscript Title  
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1. Given Name (First Name) Zhongmin
2. Surname (Last Name) Peng
3. Date 16-April-2020
4. Are you the corresponding author? Yes ❑ No ❑

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