

## ICMJE DISCLOSURE FORM

Date: 2021-03-05

Your Name: Shouxing Duan

Manuscript Title: Laparoscopic percutaneous extraperitoneal closure with peritoneum reinforcement repair for pediatric inguinal hernia: a single-center experience with over 2000 patients

Manuscript number (if known): TP-21-25

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
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		National Natural Science Foundation of China	payments to us
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		"Dengfeng Project" for the construction of high-level hospitals	payments to us

		in Guangdong Province-the First Affiliated Hospital of Shantou University Medical College Supporting Funding	
<b>Time frame: past 36 months</b>			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<u>  </u> ✓ <u>  </u> None	
3	Royalties or licenses	<u>  </u> ✓ <u>  </u> None	
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8	Patents planned, issued or pending	<u>  </u> ✓ <u>  </u> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<u>  </u> ✓ <u>  </u> None	
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## ICMJE DISCLOSURE FORM

Date: 2021-03-05

Your Name: Peijian Zhang

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Your Name: Xiaobin Lin

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Your Name: Lian Zheng

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