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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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Dechao
2. Surname (Last Name) Feng
3. Date 05-June-2020
4. Are you the corresponding author? No

Corresponding Author's Name Wuran Wei

5. Manuscript Title
Analysis of conventional versus advanced pelvic floor muscle training in the management of urinary incontinence after radical prostatectomy: a systematic review and meta-analysis of randomized controlled trials

6. Manuscript Identifying Number (if you know it) TAU-20-615

Section 2. The Work Under Consideration for Publication

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Dr. Feng has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)  
   Shengzhuo

2. Surname (Last Name)  
   Liu

3. Date  
   05-June-2020

4. Are you the corresponding author?  
   ☑ No  
   Corresponding Author’s Name  
   Wuran Wei

5. Manuscript Title  
   Analysis of conventional versus advanced pelvic floor muscle training in the management of urinary incontinence after radical prostatectomy: a systematic review and meta-analysis of randomized controlled trials

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Section 1. Identifying Information

1. Given Name (First Name)  
   Dengxiong

2. Surname (Last Name)  
   Li

3. Date  
   05-June-2020

4. Are you the corresponding author?  
   No

   Corresponding Author's Name
   Wuran Wei

5. Manuscript Title  
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Section 1. Identifying Information

1. Given Name (First Name)  Ping
2. Surname (Last Name)  Han
3. Date  05-June-2020
4. Are you the corresponding author?  No
Corresponding Author's Name  Wuran Wei

5. Manuscript Title
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Dr. Han has nothing to disclose.

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Wei
---

### Identifying Information

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

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

3. **Date**
   - 05-June-2020

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

5. **Manuscript Title**
   - Analysis of conventional versus advanced pelvic floor muscle training in the management of urinary incontinence after radical prostatectomy: a systematic review and meta-analysis of randomized controlled trials

6. **Manuscript Identifying Number (if you know it)**
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