

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Masayuki

2. Surname (Last Name)
Nakao

3. Date
01-April-2020

4. Are you the corresponding author? Yes No

5. Manuscript Title
Different perspectives and viewpoints on the postoperative management of EGFR-mutant lung cancer

6. Manuscript Identifying Number (if you know it)
ATM-20-2744(E2020030247-32010594)

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Dr. Nakao has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Junji	2. Surname (Last Name) Ichinose	3. Date 01-April-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Masayuki Nakao
5. Manuscript Title Different perspectives and viewpoints on the postoperative management of EGFR-mutant lung cancer		
6. Manuscript Identifying Number (if you know it) ATM-20-2744(E2020030247-32010594)		

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Dr. Ichinose has nothing to disclose.

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1. Given Name (First Name)
Yosuke

2. Surname (Last Name)
Matsuura

3. Date
01-April-2020

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Masayuki Nakao

5. Manuscript Title
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Sakae

2. Surname (Last Name)
Okumura

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Corresponding Author's Name
Masayuki Nakao

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