

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) haobo	2. Surname (Last Name) huang	3. Date 30-March-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Shen jianzhen
5. Manuscript Title Clinical Characteristics and Outcomes of Diffuse Large B Cell Lymphoma Treated with R-CHOP-Like or CHOP-Like Regimens: 8 Years' Experience from A Single Center		
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Dr. huang has nothing to disclose.

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1. Given Name (First Name) liping	2. Surname (Last Name) fan	3. Date 30-March-2020
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1. Given Name (First Name) danhui	2. Surname (Last Name) fu	3. Date 30-March-2020
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1. Given Name (First Name)

jianzhen

2. Surname (Last Name)

shen

3. Date

30-March-2020

4. Are you the corresponding author?

Yes No

5. Manuscript Title

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