

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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.

1. Identifying information.

2. The work under consideration for publication.

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4. Intellectual Property.

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Zhe	2. Surname (Last Name) Zhang	3. Date 18-April-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Wen-Wu Cheng
5. Manuscript Title Use of Palliative Chemotherapy Near the End of Life: A Retrospective Cohort Study		
6. Manuscript Identifying Number (if you know it) APM-20-273		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

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Section 6. Disclosure Statement

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Dr. Zhang has nothing to disclose.

Evaluation and Feedback

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1. Given Name (First Name) Meng-Lei	2. Surname (Last Name) Chen	3. Date 18-April-2020
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5. Manuscript Title Use of Palliative Chemotherapy Near the End of Life: A Retrospective Cohort Study		
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1. Given Name (First Name)

Xiao-Li

2. Surname (Last Name)

Gu

3. Date

18-April-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Wen-Wu Cheng

5. Manuscript Title

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Wen-Wu

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Cheng

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