

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)
Mian

2. Surname (Last Name)
Mao

3. Date
26-April-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Wang QiFeng & Wu Lei

5. Manuscript Title

Atezolizumab-induced psoriasis in a patient with metastatic lung cancer—a case report

6. Manuscript Identifying Number (if you know it)

TCR-20-296

Section 2. The Work Under Consideration for Publication

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Dr. Mao has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Min	2. Surname (Last Name) Shi	3. Date 26-April-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Wang QiFeng & Wu Lei
5. Manuscript Title Atezolizumab-induced psoriasis in a patient with metastatic lung cancer—a case report		
6. Manuscript Identifying Number (if you know it) TCR-20-296		

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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Dr. Shi has nothing to disclose.

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1. Given Name (First Name) Tao	2. Surname (Last Name) Li	3. Date 26-April-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Wang Qifeng & Wu Lei
5. Manuscript Title Atezolizumab-induced psoriasis in a patient with metastatic lung cancer—a case report		
6. Manuscript Identifying Number (if you know it) TCR-20-296		

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Qifeng

2. Surname (Last Name)
Wang

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26-April-2020

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5. Manuscript Title
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26-April-2020

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