

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) Ting	2. Surname (Last Name) Han	3. Date 27-April-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Feng Jiao
5. Manuscript Title Fatal interstitial lung disease associated with a series of tyrosine kinase inhibitors treatment in a non- small cell lung cancer patient: a case report		
6. Manuscript Identifying Number (if you know it)		

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Dr. Han has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Jiong

2. Surname (Last Name)

Hu

3. Date

27-April-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Feng Jiao

5. Manuscript Title

Fatal interstitial lung disease associated with a series of tyrosine kinase inhibitors treatment in a non-small cell lung cancer patient: a case report

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Dr. Hu has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Yongheng

2. Surname (Last Name)
Shi

3. Date
27-April-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Feng Jiao

5. Manuscript Title
Fatal interstitial lung disease associated with a series of tyrosine kinase inhibitors treatment in a non-small cell lung cancer patient: a case report

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Section 1. Identifying Information

1. Given Name (First Name)
Liwei

2. Surname (Last Name)
Wang

3. Date
27-April-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Feng Jiao

5. Manuscript Title
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Jiao

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27-April-2020

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