

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name) Jingjing	2. Surname (Last Name) Li	3. Date 18-July-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jieer Ying
5. Manuscript Title Elevated Carbohydrate Antigen 125 Post-operation as a Prognostic Marker in Gastric Cancer Patients with Stage II -III		
6. Manuscript Identifying Number (if you know it)		

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1. Given Name (First Name)
Qi

2. Surname (Last Name)
XU

3. Date
18-July-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Jieer Ying

5. Manuscript Title

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1. Given Name (First Name) Cong	2. Surname (Last Name) Luo	3. Date 18-July-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jieer Ying
5. Manuscript Title Elevated Carbohydrate Antigen 125 Post-operation as a Prognostic Marker in Gastric Cancer Patients with Stage II -III		
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1. Given Name (First Name) Lei	2. Surname (Last Name) Chen	3. Date 20-July-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jieer Ying
5. Manuscript Title Elevated Carbohydrate Antigen 125 Post-operation as a Prognostic Marker in Gastric Cancer Patients with Stage II -III		
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Jieer

2. Surname (Last Name)
Ying

3. Date
21-July-2020

4. Are you the corresponding author? Yes No

5. Manuscript Title
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