

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Yuanyuan	2. Surname (Last Name) Zhou	3. Date 26-March-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jin Wang
5. Manuscript Title Investigation and analysis on level of medical exposure in radiodiagnosis and radiotherapy in Jiangsu Province in 2016		
6. Manuscript Identifying Number (if you know it)		

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Are there any relevant conflicts of interest? Yes No

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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Zhou has nothing to disclose.

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1. Given Name (First Name) Ningle	2. Surname (Last Name) Yu	3. Date 26-March-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jin Wang
5. Manuscript Title Investigation and analysis on level of medical exposure in radiodiagnosis and radiotherapy in Jiangsu Province in 2016		
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Section 1. Identifying Information

1. Given Name (First Name) Jiayi	2. Surname (Last Name) Ma	3. Date 26-March-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jin Wang
5. Manuscript Title Investigation and analysis on level of medical exposure in radiodiagnosis and radiotherapy in Jiangsu Province in 2016		
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Dr. Ma has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Xiaoyong	2. Surname (Last Name) Yang	3. Date 26-March-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jin Wang
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Section 1. Identifying Information

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4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jin Wang
5. Manuscript Title Investigation and analysis on level of medical exposure in radiodiagnosis and radiotherapy in Jiangsu Province in 2016		
6. Manuscript Identifying Number (if you know it)		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Xiang	2. Surname (Last Name) Du	3. Date 26-March-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jin Wang
5. Manuscript Title Investigation and analysis on level of medical exposure in radiodiagnosis and radiotherapy in Jiangsu Province in 2016		
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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

Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Du has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Chunyong	2. Surname (Last Name) Yang	3. Date 26-March-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jin Wang
5. Manuscript Title Investigation and analysis on level of medical exposure in radiodiagnosis and radiotherapy in Jiangsu Province in 2016		
6. Manuscript Identifying Number (if you know it)		

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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

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Yang has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Furu	2. Surname (Last Name) Wang	3. Date 26-March-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jin Wang
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Jin

2. Surname (Last Name)
Wang

3. Date
26-March-2019

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