

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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#### 2. The work under consideration for publication.

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

#### 5. Relationships not covered above.

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### Section 1. Identifying Information

1. Given Name (First Name)

Yeqin

2. Surname (Last Name)

Ni

3. Date

13-November-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

Dingcun Luo

5. Manuscript Title

Axillary lymph node metastasis from papillary thyroid carcinoma with elevated CA 19-9 and CA 242 levels : a case report and literature review

6. Manuscript Identifying Number (if you know it)

GS-20-815

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Dr. Ni has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name)

Yu

2. Surname (Last Name)

Zhang

3. Date

13-November-2020

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Yes

No

Corresponding Author's Name

Dingcun Luo

5. Manuscript Title

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Kaili

2. Surname (Last Name)

Xiang

3. Date

13-November-2020

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Dingcun Luo

5. Manuscript Title

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Dr. Xiang 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) Pan	2. Surname (Last Name) Zhao	3. Date 13-November-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Dingcun Luo
5. Manuscript Title Axillary lymph node metastasis from papillary thyroid carcinoma with elevated CA 19-9 and CA 242 levels : a case report and literature review		
6. Manuscript Identifying Number (if you know it) GS-20-815		

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) You	2. Surname (Last Name) Peng	3. Date 13-November-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Dingcun Luo
5. Manuscript Title Axillary lymph node metastasis from papillary thyroid carcinoma with elevated CA 19-9 and CA 242 levels : a case report and literature review		
6. Manuscript Identifying Number (if you know it) GS-20-815		

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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

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Peng has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Jingjing	2. Surname (Last Name) Shi	3. Date 13-November-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Dingcun Luo
5. Manuscript Title Axillary lymph node metastasis from papillary thyroid carcinoma with elevated CA 19-9 and CA 242 levels : a case report and literature review		
6. Manuscript Identifying Number (if you know it) GS-20-815		

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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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Dr. Shi 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) Li	2. Surname (Last Name) Zhou	3. Date 13-November-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Dingcun Luo
5. Manuscript Title Axillary lymph node metastasis from papillary thyroid carcinoma with elevated CA 19-9 and CA 242 levels : a case report and literature review		
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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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## ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Zhou 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) Linlin	2. Surname (Last Name) Mao	3. Date 13-November-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Dingcun Luo
5. Manuscript Title Axillary lymph node metastasis from papillary thyroid carcinoma with elevated CA 19-9 and CA 242 levels : a case report and literature review		
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Are there any relevant conflicts of interest?  Yes  No

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Dr. Mao 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)

Dingcun

2. Surname (Last Name)

Luo

3. Date

13-November-2020

4. Are you the corresponding author?

Yes  No

5. Manuscript Title

Axillary lymph node metastasis from papillary thyroid carcinoma with elevated CA 19-9 and CA 242 levels : a case report and literature review

6. Manuscript Identifying Number (if you know it)

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