

Instructions

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Section 1.	Identifying Inform	ation				
1. Given Name (Fi Yunpeng			ne (Last Name)		3. Date 27-August-2020
4. Are you the cor	responding author?	Yes	✓ No	Correspond Li Zhang	ding Author'	's Name
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Section 2.	The Work Under Co	onsiderat	tion for Pu	olication		
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MSD China					✓ s	ponsored and funded by MSD China
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Dr. Yang reports other from MSD China, during the conduct of the study.

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1. Given Name (First Name) Quchang	2. Surname (Last Name) Ouyang	3. Date 27-August-2020
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Name Li Zhang
5. Manuscript Title Safety and efficacy of aprepitant as mon induced nausea and vomiting: post-mar		py for the prevention of emetogenic chemotherapy- na
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Do you have an	y patents, whether planı	ned, pendi	ng or issued	l, broadly releva	int to the	work? Yes 🖌	No



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Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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Section 6. Disclosure Statement

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Dr. Li reports other from MSD China, during the conduct of the study.

Evaluation and Feedback



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Section 1.	Identifying Inform	ation					
1. Given Name (Fi Wangjun			ne (Last Name)			3. Date 27-August-2020	
4. Are you the cor	responding author?	Yes	✓ No	Correspond Li Zhang	ding Author's	Name	
5. Manuscript Title Safety and efficacy of aprepitant as mono and combination therapy for the prevention of emetogenic chemotherapy- induced nausea and vomiting: post-marketing surveillance in China							
6. Manuscript Ide CCO-20-160	ntifying Number (if you kn	ow it)					
Section 2.	The Work Under Co	onsiderat	tion for Pub	lication			
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Name of Institut	tion/Company	Grant?	Personal N Fees?	on-Financial Support <mark>?</mark>	Other?	Comments	
MSD China					✓ sp	oonsored and funded by MSD China	
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Do you have any	v patents, whether planr	ned, pendi	ng or issued,	broadly releva	nt to the wo	ork? 🗌 Yes 🖌 No	



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Dr. Liao reports other from MSD China, during the conduct of the study.

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1. Given Name (First Name) 2. Surname (Last Name) 3. Date Kaican Cai 27-August-2020 4. Are you the corresponding author? Yes ✓ No Corresponding Author's Name Li Zhang 5. Manuscript Title Safety and efficacy of aprepitant as mono and combination therapy for the prevention of emetogenic chemotherapy-induced nausea and vomiting: post-marketing surveillance in China 6. 6. Manuscript Identifying Number (if you know it) CCO-20-160 CCO-20-160 Section 2. The Work Under Consideration for Publication Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?
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any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation,
Are there any relevant conflicts of interest? Yes No If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row.
Excess rows can be removed by pressing the "X" button.
Name of Institution/Company Grant? Personal Non-Financial Other? Comments Fees? Support? Other? Comments Comments
SD China sponsored and funded by MSD China
Section 3. Relevant financial activities outside the submitted work.
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Are there any relevant conflicts of interest? Yes 🖌 No
Are there any relevant conflicts of interest? Yes Vo Section 4. Intellectual Property Patents & Copyrights



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Dr. Cai reports other from MSD China, during the conduct of the study.

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Section 1.	Identifying Inform	ation				
1. Given Name (Fi Jianjin			ne (Last Name)			3. Date 27-August-2020
4. Are you the cor	rresponding author?	Yes	✓ No	Correspondi Li Zhang	ng Author's N	lame
5. Manuscript Title Safety and efficacy of aprepitant as mono and combination therapy for the prevention of emetogenic chemotherapy- induced nausea and vomiting: post-marketing surveillance in China						
6. Manuscript Ide CCO-20-160	ntifying Number (if you kn	ow it)				
Section 2.	The Work Under Co	onsiderat	ion for Publ	ication		
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Name of Institut	tion/Company	Grant?	Personal No Fees?	Support?	Other? Co	omments
MSD China					✓ spo	nsored and funded by MSD China
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Section 1.	Identifying Inform	ation					
1. Given Name (Fi			ne (Last Name	·)		3. Date 27-August-2	2020
4. Are you the cor	responding author?	Yes	🖌 No	Correspond Li Zhang	ding Autho	or's Name	
•	e cy of aprepitant as mor and vomiting: post-ma				revention	of emetogenic che	emotherapy-
6. Manuscript Ider CCO-20-160	ntifying Number (if you kn	ow it)					
Section 2.	The Work Under Co	onsiderat	tion for Pul	olication			
any aspect of the s statistical analysis,	stitution at any time recei submitted work (including etc.)? evant conflicts of intere	but not lim	nited to grants	, data monitoring			
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MSD China					\checkmark	sponsored and fund	led by MSD China
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Did you or your institut any aspect of the subm statistical analysis, etc.) Are there any relevan	hitted work (including ?	but not lim	ited to grants, o					for
If yes, please fill out t Excess rows can be r	he appropriate info	rmation b	elow. lf you ha	ave more than	i one enti	ty press the "ADD	D" button to add a roy	w.
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MSD China					\checkmark	sponsored and fur	nded by MSD China	
Section 3. Re	levant financial a	activities	outside the	submitted	work.			
Place a check in the a of compensation) wi clicking the "Add +" Are there any releva	th entities as descril box. You should rep	oed in the ort relatio	instructions. nships that w	Use one line fo	or each er	ntity; add as many	/ lines as you need by	
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Do you have any pat	ents, whether planr	ied, pendi	ng or issued, l	broadly releva	nt to the	work? Yes	✓ No	



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Dr. Zhang reports other from MSD China, during the conduct of the study.

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Section 1.	Identifying Inform	ation				
1. Given Name (Fi Xiaojia			ne (Last Name)			3. Date 27-August-2020
4. Are you the cor	rresponding author?	Yes	✓ No	Correspondi Li Zhang	ng Author's N	Name
5. Manuscript Title Safety and efficacy of aprepitant as mono and combination therapy for the prevention of emetogenic chemothera induced nausea and vomiting: post-marketing surveillance in China						
6. Manuscript Ide CCO-20-160	ntifying Number (if you kn	ow it)				
Section 2.	The Work Under Co	onsiderat	tion for Publ	ication		
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4. Are you the cor	rresponding author?	Yes	✓ No	Correspond Li Zhang	ding Author'	's Name	
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6. Manuscript Ide CCO-20-160	ntifying Number (if you kn	iow it)					
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1. Given Name (First Name) 2. Sumame (Last Name) 3. Date Nong Yes No Corresponding Author's Name 1. A rey ou the corresponding author? Yes No Corresponding Author's Name 1. Sumocript Tille Safaty and efficits Sapare transmission Safaty and efficits 3. Manuscript Tille Safaty and efficits Sapare transmission No 4. Manuscript Tille Safaty and efficits Samarketing surveillance in China 5. Manuscript Tille Safaty and efficits Safaty and efficits 6. Manuscript Tille Safaty and efficits Safaty and efficits 6. Manuscript Tille Safaty and efficits Safaty and efficits 6. Manuscript Tille Manuscript Identifying Number (if you know it) COC-20-160 Section 2. The Work Under Consideration for Publication Diveory on your institution at any time rescive payment or services from a third party (government, commercial, private foundation, etc.) for any sapect of the submitted work (including but not limited to grants, data moniforing board, study design, manuscript preparation, statistical analysis, etc.] Are tree any relevant cofflicts of interest? Yes No Section 1. Section 1. <	Section 1.	Identifying Inform	ation					
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1. Given Name (F Xingsheng	irst Name)	2. Surnam Hu	e (Last Nam	e)		3. Date 27-August-2020	
4. Are you the co	rresponding author?	Yes	✓ No	Correspon Li Zhang	ding Author	's Name	
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6. Manuscript Ide CCO-20-160	ntifying Number (if you kr	iow it)					
Section 2.	The Work Under Co	onsiderati	ion for Pu	blication			
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Name of Institu	tion/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments	
MSD China					✓ s	ponsored and funded by MSD C	hina
Section 3.	Relevant financial	activities	outside tl	ne submitted	work.		
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Section 4.	Intellectual Proper	ty Pater	nts & Cop	yrights			
Do you have any	y patents, whether plan	ned, pendir	ng or issuec	l, broadly releva	ant to the w	vork? Yes 🖌 No	



Section 5. Relationships not covered above

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1. Given Name (First Name) Wei	2. Surname (Last Name) Li) 3. Date 27-August-2020					
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Name Li Zhang					
5. Manuscript Title Safety and efficacy of aprepitant as mo induced nausea and vomiting: post-ma		erapy for the prevention of emetogenic chemotherapy- China					
6. Manuscript Identifying Number (if you kr CCO-20-160	now it)						
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Are there any relevant conflicts of intere If yes, please fill out the appropriate info		o nave more than one entity press the "ADD" button to add a row.					
Excess rows can be removed by pressin							
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Section 4. Intellectual Proper	rty Patents & Copy						
Section 4. Intellectual Proper Do you have any patents, whether plan							



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1. Given Name (First Name) Wei	2. Surname (Last Name) Zhong	3. Date 27-August-2020
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Section 1.	Identifying Inform	ation					
1. Given Name (Fi DianSheng			ne (Last Name	2)		3. Date 27-August-2020	
4. Are you the co	rresponding author?	Yes	✓ No	Correspond Li Zhang	ding Author	's Name	
•					revention o	of emetogenic chemotherapy-	
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MSD China					✓ s	ponsored and funded by MSD China	
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Dr. Cheng reports other from MSD China, during the conduct of the study; .Dr. Cheng reports other from MSD China, during the conduct of the study; .

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patent

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Section 1.	Identifying Inform	ation				
1. Given Name (Fi MeiZuo			ne (Last Name)			3. Date 27-August-2020
4. Are you the co	rresponding author?	Yes	✓ No	Correspond Li Zhang	ling Author's	Name
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6. Manuscript Ide CCO-20-160	ntifying Number (if you kn	ow it)				
Section 2.	The Work Under Co	onsiderat	tion for Publ	ication		
any aspect of the statistical analysis	submitted work (including	but not lim	ited to grants, c			commercial, private foundation, etc.) for design, manuscript preparation,
lf yes, please fill		rmation b	elow. If you ha	ive more than	one entity p	press the "ADD" button to add a row.
Name of Institu	<i>,</i>	Grant?	Personal No	on-Financial Support <mark>?</mark>	Other? C	Comments
MSD China					✓ spo	onsored and funded by MSD China
Section 3.	Relevant financial	activities	outside the	submitted v	vork.	
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Section 4.	Intellectual Proper	ty Pate	nts & Copyr	ights		
Do you have any	y patents, whether planr	ned, pendi	ng or issued, k	broadly releva	nt to the wo	rk? ☐ Yes 🖌 No



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					revention o	of emetogenic chemotherapy-	
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Name of Institut	tion/Company	Grant?	Personal N Fees?	Non-Financial Support?	Other?	Comments	
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Section 1. Identifying Inform	ation						
1. Given Name (First Name) Hui	2. Surname (Last Name) Liu	3. Date 27-August-2020					
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Name Li Zhang					
5. Manuscript Title Safety and efficacy of aprepitant as mon induced nausea and vomiting: post-mar		py for the prevention of emetogenic chemotherapy- na					
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Are there any relevant conflicts of intere If yes, please fill out the appropriate info		re more than one entity press the "ADD" button to add a row.					
Excess rows can be removed by pressing							
Name of Institution/Company	Grant [?] Personal Nor Fees [?] S	n-Financial upport? Other? Comments					
MSD China		sponsored and funded by MSD China					
Section 3. Relevant financial a	activities outside the s	ubmitted work.					
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Intellectual Propert	ty Patents & Copyrig	ints internet in the second					
Do you have any patents, whether plann	ned, pending or issued, br	oadly relevant to the work? \Box Yes \checkmark No					



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Section 1. Identifying Inform	ation				
1. Given Name (First Name) JiHua	2. Surname (Last Name) Zheng	3. Date 27-August-2020			
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Name Li Zhang			
5. Manuscript Title Safety and efficacy of aprepitant as mor induced nausea and vomiting: post-ma	-	by for the prevention of emetogenic chemotherapy- na			
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Dr. Xu reports other from MSD China, during the conduct of the study.

Evaluation and Feedback



Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

1. Identifying information.

2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

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Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

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

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Definitions.

Entity: government agency, foundation, commercial sponsor, academic institution, etc.

Grant: A grant from an entity, generally [but not always] paid to your organization

Personal Fees: Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

Non-Financial Support: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.



Section 1.	Identifying Inform	ation						
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Li		Zhang			27-August-2020			
4. Are you the cor	responding author?	✓ Yes No						
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