

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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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Ibrahim Halil

2. Surname (Last Name)

Sahin

3. Date

17-December-2020

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name

Ahmad Kaseb

5. Manuscript Title

Neoadjuvant and Adjuvant Treatment approaches for hepatocellular carcinoma: Future Outlook

6. Manuscript Identifying Number (if you know it)

CCO-2020-HC-12(CCO-20-248)

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Dr. Sahin 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) Lana	2. Surname (Last Name) Khalil	3. Date 16-December-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Ahmad Kaseb
5. Manuscript Title Neoadjuvant and Adjuvant Treatment approaches for hepatocellular carcinoma: Future Outlook		
6. Manuscript Identifying Number (if you know it) CCO-2020-HC-12(CCO-20-248)		

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.)?

Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Dr. Khalil has nothing to disclose.

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1. Given Name (First Name)

Ralph

2. Surname (Last Name)

Millett

3. Date

17-December-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Ahmad Kaseb

5. Manuscript Title

Neoadjuvant and Adjuvant Treatment approaches for hepatocellular carcinoma: Future Outlook

6. Manuscript Identifying Number (if you know it)

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1. Given Name (First Name)

Ahmad

2. Surname (Last Name)

Kaseb

3. Date

18-December-2020

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☒ Yes ☐ No

5. Manuscript Title

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