

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Xianghai	2. Surname (Last Name) Ren	3. Date 16-March-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Congqing Jiang and Qun Qian
5. Manuscript Title The challenges in colorectal cancer management during COVID-19 epidemic		
6. Manuscript Identifying Number (if you know it) ATM-20-2080		

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1. Given Name (First Name)
Yuntian

2. Surname (Last Name)
Hong

3. Date
16-March-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Congqing Jiang and Qun Qian

5. Manuscript Title

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5. Manuscript Title The challenges in colorectal cancer management during COVID-19 epidemic		
6. Manuscript Identifying Number (if you know it) ATM-20-2080		

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