

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name) Jia	2. Surname (Last Name) Gu	3. Date 29-March-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Ning Zhao
5. Manuscript Title Prognostic factors for laryngeal sarcoma and nomogram development for prediction: a retrospective study based on SEER database		
6. Manuscript Identifying Number (if you know it)		

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Dr. Gu has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Zhifan

2. Surname (Last Name)
Zuo

3. Date
29-March-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Ning Zhao

5. Manuscript Title
Prognostic factors for laryngeal sarcoma and nomogram development for prediction: a retrospective study based on SEER database

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Dr. Zuo has nothing to disclose.

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Lei

2. Surname (Last Name)
Sun

3. Date
29-March-2020

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Yes No

Corresponding Author's Name
Ning Zhao

5. Manuscript Title

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