

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name) Jing	2. Surname (Last Name) Liu	3. Date 08-July-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Yao ninghua
5. Manuscript Title Identification of critical genes in gastric cancer to predict prognosis using bioinformatics analysis methods		
6. Manuscript Identifying Number (if you know it) ATM-20-4427		

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Dr. Liu has nothing to disclose.

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1. Given Name (First Name)

Liang

2. Surname (Last Name)

Ma

3. Date

08-July-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Yao ninghua

5. Manuscript Title

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ATM-20-4427

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Dr. Ma has nothing to disclose.

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4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Yao ninghua
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Yao

2. Surname (Last Name)

Song

3. Date

08-July-2020

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Yes No

5. Manuscript Title

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Xianchen

2. Surname (Last Name)

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3. Date

08-July-2020

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Yes

No

Corresponding Author's Name

Yao ninghua

5. Manuscript Title

Identification of critical genes in gastric cancer to predict prognosis using bioinformatics analysis methods

6. Manuscript Identifying Number (if you know it)

ATM-20-4427

Section 2. The Work Under Consideration for Publication

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1. Given Name (First Name)

Hongyu

2. Surname (Last Name)

Zhao

3. Date

08-July-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Yao ninghua

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ninghua

2. Surname (Last Name)

Yao

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08-July-2020

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