

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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#### 1. Identifying information.

#### 2. The work under consideration for publication.

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#### 4. Intellectual Property.

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

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Zhewen

2. Surname (Last Name)

Wei

3. Date

03-September-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

Jianjun Zhao, Hong Zhao, Jianqiang Cai

5. Manuscript Title

The Prognostic Factors of Primary Colorectal Sarcoma and the Clinical Outcomes of Negative Lymph Node Dissection

6. Manuscript Identifying Number (if you know it)

ATM-20-4286

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Dr. Wei has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name)

Rui

2. Surname (Last Name)

Mao

3. Date

03-September-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

Jianjun Zhao, Hong Zhao, Jianqiang Cai

5. Manuscript Title

The Prognostic Factors of Primary Colorectal Sarcoma and the Clinical Outcomes of Negative Lymph Node Dissection

6. Manuscript Identifying Number (if you know it)

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Dr. Mao has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Yefan	2. Surname (Last Name) Zhang	3. Date 07-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jianjun Zhao, Hong Zhao, Jianqiang Cai
5. Manuscript Title The Prognostic Factors of Primary Colorectal Sarcoma and the Clinical Outcomes of Negative Lymph Node Dissection		
6. Manuscript Identifying Number (if you know it) ATM-20-4286		

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Dr. Zhang has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Xinyu	2. Surname (Last Name) Bi	3. Date 08-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jianjun Zhao, Hong Zhao, Jianqiang Cai
5. Manuscript Title The Prognostic Factors of Primary Colorectal Sarcoma and the Clinical Outcomes of Negative Lymph Node Dissection		
6. Manuscript Identifying Number (if you know it) ATM-20-4286		

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Dr. Bi has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Jianguo	2. Surname (Last Name) Zhou	3. Date 04-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jianjun Zhao, Hong Zhao, Jianqiang Cai
5. Manuscript Title The Prognostic Factors of Primary Colorectal Sarcoma and the Clinical Outcomes of Negative Lymph Node Dissection		
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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Zhiyu

2. Surname (Last Name)

Li

3. Date

06-September-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

Jianjun Zhao, Hong Zhao, Jianqiang Cai

5. Manuscript Title

The Prognostic Factors of Primary Colorectal Sarcoma and the Clinical Outcomes of Negative Lymph Node Dissection

6. Manuscript Identifying Number (if you know it)

ATM-20-4286

### Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?  Yes  No

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Are there any relevant conflicts of interest?  Yes  No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Li has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Zhen	2. Surname (Last Name) Huang	3. Date 09-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jianjun Zhao, Hong Zhao, Jianqiang Cai
5. Manuscript Title The Prognostic Factors of Primary Colorectal Sarcoma and the Clinical Outcomes of Negative Lymph Node Dissection		
6. Manuscript Identifying Number (if you know it) ATM-20-4286		

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Are there any relevant conflicts of interest?  Yes  No

### Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest?  Yes  No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Xiao	2. Surname (Last Name) Chen	3. Date 06-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jianjun Zhao, Hong Zhao, Jianqiang Cai
5. Manuscript Title The Prognostic Factors of Primary Colorectal Sarcoma and the Clinical Outcomes of Negative Lymph Node Dissection		
6. Manuscript Identifying Number (if you know it) ATM-20-4286		

### 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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Are there any relevant conflicts of interest?  Yes  No

### Section 4. Intellectual Property -- Patents & Copyrights

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Jianjun

2. Surname (Last Name)

Zhao

3. Date

09-September-2020

4. Are you the corresponding author?

Yes  No

5. Manuscript Title

The Prognostic Factors of Primary Colorectal Sarcoma and the Clinical Outcomes of Negative Lymph Node Dissection

6. Manuscript Identifying Number (if you know it)

ATM-20-4286

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Dr. Zhao has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Hong

2. Surname (Last Name)

Zhao

3. Date

10-September-2020

4. Are you the corresponding author?

Yes  No

5. Manuscript Title

The Prognostic Factors of Primary Colorectal Sarcoma and the Clinical Outcomes of Negative Lymph Node Dissection

6. Manuscript Identifying Number (if you know it)

ATM-20-4286

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Jianqiang	2. Surname (Last Name) Cai	3. Date 10-September-2020
4. Are you the corresponding author? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
5. Manuscript Title The Prognostic Factors of Primary Colorectal Sarcoma and the Clinical Outcomes of Negative Lymph Node Dissection		
6. Manuscript Identifying Number (if you know it) ATM-20-4286		

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### Section 5. Relationships not covered above

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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- No other relationships/conditions/circumstances that present a potential conflict of interest

At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

### Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Cai has nothing to disclose.

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