

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) Runtian	2. Surname (Last Name) Luo	3. Date 19-October-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Qing Jiang
5. Manuscript Title Effect of obesity on the prognosis and recurrence of prostate cancer after radical prostatectomy: a meta-analysis		
6. Manuscript Identifying Number (if you know it) 		

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

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Dr. Luo has nothing to disclose.

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1. Given Name (First Name) Yongbo	2. Surname (Last Name) Chen	3. Date 19-October-2020
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Ke

2. Surname (Last Name)
Ran

3. Date
19-October-2020

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☐ Yes ☒ No

Corresponding Author's Name
Qing Jiang

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