

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name) Jae joon	2. Surname (Last Name) Park	3. Date 03-October-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Ki Hyun Kim, Jae Heon Kim
5. Manuscript Title Diagnostic accuracy of Raman spectroscopy for prostate cancer: A Systematic Review and Meta-Analysis		
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Dr. Park has nothing to disclose.

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1. Given Name (First Name) Do kyung	2. Surname (Last Name) Kim	3. Date 03-October-2020
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1. Given Name (First Name) Soomin	2. Surname (Last Name) Lee	3. Date 03-October-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Ki Hyun Kim, Jae Heon Kim
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1. Given Name (First Name) Yoonseo	2. Surname (Last Name) Choi	3. Date 03-October-2020
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Joon Ho	2. Surname (Last Name) Lee	3. Date 03-October-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Ki Hyun Kim, Jae Heon Kim
5. Manuscript Title Diagnostic accuracy of Raman spectroscopy for prostate cancer: A Systematic Review and Meta-Analysis		
6. Manuscript Identifying Number (if you know it) TAU-20-924		

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Ki Hyun

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