

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) Xi	2. Surname (Last Name) Chen	3. Date 10-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Liqun Zou
5. Manuscript Title Assessment of the prognostic value of interim fluorodeoxyglucose positron emission tomography/computed tomography in nasal type extranodal natural killer/T-cell lymphoma		
6. Manuscript Identifying Number (if you know it) QIMS-20-620		

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Dr. Chen has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Hongxi

2. Surname (Last Name)
Wang

3. Date
10-October-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Liqun Zou

5. Manuscript Title
Assessment of the prognostic value of interim fluorodeoxyglucose positron emission tomography/computed tomography in nasal type extranodal natural killer/T-cell lymphoma

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1. Given Name (First Name) Chunxi Fu	2. Surname (Last Name) Fu	3. Date 10-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Liqun Zou
5. Manuscript Title Assessment of the prognostic value of interim fluorodeoxyglucose positron emission tomography/computed tomography in nasal type extranodal natural killer/T-cell lymphoma		
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Licensed: The patent has been licensed to an entity, whether earning royalties or not

Royalties: Funds are coming in to you or your institution due to your patent

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Section 1. Identifying Information

1. Given Name (First Name)
Liqun

2. Surname (Last Name)
Zou

3. Date
10-October-2020

4. Are you the corresponding author? Yes No

5. Manuscript Title
Assessment of the prognostic value of interim fluorodeoxyglucose positron emission tomography/computed tomography in nasal type extranodal natural killer/T-cell lymphoma

6. Manuscript Identifying Number (if you know it)
QIMS-20-620

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 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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Dr. Zou has nothing to disclose.

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