

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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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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Other: Anything not covered under the previous three boxes

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Xiaokang	2. Surname (Last Name) Shen	3. Date 28-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Shilin Chen
5. Manuscript Title MRI-guided microwave ablation for lung tumors: A case report		
6. Manuscript Identifying Number (if you know it) QIMS-20-667		

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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Dr. Shen has nothing to disclose.

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1. Given Name (First Name) Tianming	2. Surname (Last Name) Chen	3. Date 28-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Shilin Chen
5. Manuscript Title MRI-guided microwave ablation for lung tumors: A case report		
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1. Given Name (First Name) Bo	2. Surname (Last Name) Yang	3. Date 28-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Shilin Chen
5. Manuscript Title MRI-guided microwave ablation for lung tumors: A case report		
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Dr. Yang has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Nianlong	2. Surname (Last Name) Liu	3. Date 28-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Shilin Chen
5. Manuscript Title MRI-guided microwave ablation for lung tumors: A case report		
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Section 1. Identifying Information

1. Given Name (First Name)
Xiaowei

2. Surname (Last Name)
Qian

3. Date
28-September-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Shilin Chen

5. Manuscript Title
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6. Manuscript Identifying Number (if you know it)
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4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Shilin Chen
5. Manuscript Title MRI-guided microwave ablation for lung tumors: A case report		
6. Manuscript Identifying Number (if you know it) QIMS-20-667		

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1. Given Name (First Name) Dongjie	2. Surname (Last Name) Feng	3. Date 28-September-2020
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1. Given Name (First Name)
Shilin

2. Surname (Last Name)
Chen

3. Date
28-September-2020

4. Are you the corresponding author? Yes No

5. Manuscript Title
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6. Manuscript Identifying Number (if you know it)
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