Date:12 April 2023				
Your Name:_Yati Afiyanti				
Manuscript Title: "Growth and development of oncology nursing in Asia"				
Manuscript number (if known): APM-22-1399				

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In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items,

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
	Ti	me frame: Since the initia	I planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	_XNone	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	_XNone	

3	Royalties or licenses	XNone
4	Consulting fees	XNone
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone
6	Payment for expert testimony	_XNone
7	Support for attending meetings and/or travel	_XNone
8	Patents planned, issued or pending	_XNone
9	Participation on a Data Safety Monitoring Board or Advisory Board	_XNone
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone
11	Stock or stock options	_XNone
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	_XNone
13	Other financial or non-financial interests	_XNone

I declare no conflict of interest.		

Please place an "X" next to the following statement to indicate your agreement:
_X I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date:	12 April 2023		
Your Nar	me:Hiroko Komatsu		
Manuscr	ipt Title:Growth a	nd development of oncology nursing in Asia_	
Manuscr	ipt number (if known)	APM-22-1399	

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		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initi	al planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  No time limit for this item.	_X_None	
		Time frame: pas	t 36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	X None	
3	Royalties or licenses	_X_None	
4	Consulting fees	X None	

Payment or honoraria for	_X_None	
educational events		
Payment for expert	X None	
testimony		
	X_None	
meetings and/or travel		
Patents planned, issued or	X None	
pending		
Participation on a Data	X None	
Advisory Board		
Leadership or fiduciary role in other board, society, committee or advocacy	_X_None	
	X None	
Stock of Stock options	None	
Receipt of equipment, materials, drugs, medical	X None	
	V None	
	lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment,	lectures, presentations, speakers bureaus, manuscript writing or educational events  Payment for expert testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-  X None

There is no conflict of interest.	1000

Please place an "X" next to the following statement to indicate your agreement:

\_X\_ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Miroko Komatsu, Japanese Red Cross Kyushu International College of Nursing

Date:13 th April	
2023	
Your Name:Prathepa	
Jagdish	
Manuscript Title:Growth and development of Oncology Nursing in	
Asia	
Manuscript number (if known):APM-22-	
1200	

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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	

4	Consulting fees	_XNone	
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5	Payment or honoraria for	_X_None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	V Name	
0	testimony	X_None	
	testimony		
7	Support for attending	V Nana	
′	meetings and/or travel	_XNone	
	Intectings and/or traver		
8	Patents planned, issued or	_XNone	
	pending		
	5		
9	Participation on a Data	XNone	
	Safety Monitoring Board or Advisory Board		
10	•	V N	
10	Leadership or fiduciary role in other board, society,	XNone	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X None	
	Stock of Stock options	X_None	
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	X None	
	financial interests		
Plea	ise summarize the above co There is no conflict of		llowing box:

Please place an "X" next to the following statement to indicate your agreement:

_X I certify that I have answered every question and have not altered the wording of any of the questions on this form.	

Date:11 April 2023
Your Name:Ariesta Milanti
Manuscript Title: "Growth and development of oncology nursing in Asia"
Manuscript number (if known): APM-22-1399

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	Ti	me frame: Since the initia	I planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  No time limit for this item.	_XNone	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	

3	Royalties or licenses	XNone
4	Consulting fees	_XNone
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	_XNone
6	Payment for expert testimony	XNone
7	Support for attending meetings and/or travel	_X_None
8	Patents planned, issued or pending	XNone
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone
11	Stock or stock options	X None
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	_XNone
13	Other financial or non- financial interests	_XNone

I declare no conflic	ct of interest.		

Please place an "X" next to the following statement to indicate your agreement:				
_X I certify that I have answered every question and have not altered the wording of any of th questions on this form.				

Date: 11 April 2023	
Your Name: Kittikorn Nilmamat	
Manuscript Title: Growth and development of oncology nursing in Asia	
Manuscript number (if known): APM-22-1399	

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		Ti	Name all entities with whom you have this relationship or indicate none (add rows as needed) me frame: Since the initia	Specifications/Comments (e.g., if payments were made to you or to your institution)
ŀ	_			
	1	All support for the	XNone	
		present manuscript (e.g.,		
		funding, provision of		
		study materials, medical		
		writing, article processing		
		•		
		charges, etc.)		
		No time limit for this		
		item.		
ı			Time frame: past	36 months
	•		· ·	30 months
	2	Grants or contracts from	_XNone	
		any entity (if not indicated		
		in item #1 above).		
	3	Royalties or licenses	_XNone	

4	Consulting fees	<u>X</u> None	
5	Payment or honoraria for	<u>X</u> _None	
	lectures, presentations,		
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert	X_None	
	testimony		
_			
7	Support for attending meetings and/or travel	XNone	
	, and the second		
8	Patents planned, issued	_ <u>X</u> None	
	or pending		
9	Participation on a Data	X_None	
	Safety Monitoring Board or Advisory Board		
10	•	V N	
10	Leadership or fiduciary role in other board,	<u>X</u> None	
	society, committee or		
	advocacy group, paid or		
	unpaid		
11	Stock or stock options	X_None	
12	Receipt of equipment,	X_None	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-	_ <u>X</u> None	
	financial interests		

There is no conflict of interest.

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	I certify that I have answered every question and have not altered the wording of any of the tions on this
•	form.
	e. Hihm

Kittikorn Nilmanat, Faculty of Nursing, Prince of Songkla University, Thailand

Date: 12-04-2023	
Your Name: Yeur-Hur Lai	
Manuscript Title: Growth and development of oncology nursing in Asia	
Manuscript number (if known): APM-22-1399	

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	_	needed)	
	li	me frame: Since the initia	I planning of the work
1	All support for the	X None	
	present manuscript (e.g.,		
	funding, provision of		
	study materials, medical		
	writing, article processing		
	charges, etc.)		
	No time limit for this		
	item.		
		Time frame: past	36 months
2	Grants or contracts from	_X_ None	
	any entity (if not indicated		
	in item #1 above).		

3	Royalties or licenses	_X_ None
4	Consulting fees	_X _None
5	Payment or honoraria for	_XNone
	lectures, presentations,	
	speakers bureaus, manuscript writing or	
	educational events	
6	Payment for expert	_XNone
	testimony	
7	Support for attending meetings and/or travel	_X None
8	Patents planned, issued	_XNone
	or pending	
0	Double in a blanca and Date	V Name
9	Participation on a Data Safety Monitoring Board	_X _None
	or Advisory Board	
10	Leadership or fiduciary	_XNone
	role in other board,	
	society, committee or	
	advocacy group, paid or	
	unpaid	Y N
11	Stock or stock options	_XNone
12	Receipt of equipment,	_X_ None
	materials, drugs, medical	
	writing, gifts or other services	
13	Other financial or non-	_X_ None
	financial interests	

No conflict of inte	erest.		

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I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date:	12-04-2023
Your Name	e:Mei-Nan <u>Liao</u>
Manuscrip	ot Title: Growth and development of oncology nursing in Asia
Manuscrip	ot number (if known):_APM-22-1399

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		Time frame: Since the initia	l planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  No time limit for this item.	X None	
		Time frame: past	26 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	_X_ None	. So monus
3	Royalties or licenses	_X_ None	
4	Consulting fees	_X _None	

5	Payment or honoraria for	_XNone	
	lectures, presentations,		
	speakers bureaus, manuscript writing or educational events		
6	The second secon	V N	
0	Payment for expert testimony	_XNone	
7	Support for attending meetings and/or travel	_X None	
8	Patents planned, issued or pending	_XNone	
9	Participation on a Data	_XNone	
	Safety Monitoring Board or Advisory Board		
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	_XNone	
11	Stock or stock options	X_None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other	_X_ None	
	services		
13	Other financial or non- financial interests	_X_None	
	manual merests		

No conflict of interest.				

Please place an "X" next to the following statement to indicate your agreement:

 certify that I h	ave answered every question and have not	altered the wording of any of the questions on t	:hi
form.	to a so of the	0	
	Mei Nan Lous	Sprul 13, 2023	

Date:April 17, 2	2023
Your Name: Ms	.Anita D'Souza
Manuscript Title:Gr	rowth and developent of oncology nursing in Asia
Manuscript number (if I	known):APM-22-1399

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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	_xNone	

3	Royalties or licenses	xNone
4	Consulting fees	xNone
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	_xNone
6	Payment for expert testimony	xNone
7	Support for attending meetings and/or travel	_xNone
8	Patents planned, issued or pending	_xNone
9	Participation on a Data Safety Monitoring Board or Advisory Board	xNone
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	x_None
11	Stock or stock options	_xNone
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	x_None
13	Other financial or non- financial interests	xNone

There are no conflicts			

Please place an "X" next to the following statement to indicate your agreement:
_X I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date:April 10 <sup>th</sup> , 2021	
Your Name:Margaret I Fitch	
Manuscript Title:Growth and development of oncology nursing in Asia	
Manuscript number (if known):APM-22-1399	

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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	_xNone	

3	Royalties or licenses	_xNone	
4	Consulting fees	x_None	
5	Doumont or honoraria for	x None	
5	Payment or honoraria for lectures, presentations, speakers' bureaus,	_xNone	
	manuscript writing or		
_	educational events	Nava	
6	Payment for expert testimony	xNone	
7	Support for attending meetings and/or travel	x_None	
	meetings and/or traver		
8	Patents planned, issued	x_None	
	or pending		
9	Participation on a Data	_xNone	
·	Safety Monitoring Board	_XNOTIC	
	or Advisory Board		
10	Leadership or fiduciary	x_None	
	role in other board,		
	society, committee or advocacy group, paid or		
	unpaid		
11	Stock or stock options	x_None	
12	Receipt of equipment,	_x_None	
12	materials, drugs, medical writing, gifts or other services	XNONE	
13	Other financial or non- financial interests	x_None	

There are no conflicts for this paper.	

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