

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name)
Liyuan

2. Surname (Last Name)
Huang

3. Date
09-April-2020

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Jiancheng Li

5. Manuscript Title

Understanding the pattern of lymph node metastasis for trans-segmental thoracic esophageal cancer to develop precise delineation of clinical target volume for radiotherapy

6. Manuscript Identifying Number (if you know it)

APM-19-316

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Dr. Huang has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)
chen

2. Surname (Last Name)
chen

3. Date
09-April-2020

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Jiancheng Li

5. Manuscript Title

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Mingqiang

2. Surname (Last Name)
Lin

3. Date
09-April-2020

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☐ Yes ☒ No

Corresponding Author's Name
Jiancheng Li

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Jiancheng

2. Surname (Last Name)

Li

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