Date:	2021-09-29	
Your Name:	Xiaofeng Kuang	
Manuscript Title: Correlation rese	arch between fear of disease progression and quality of life	e in
patients with lung cancer		
Manuscript number (if known):		

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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	None
3	Royalties or licenses	None	None
4	Consulting fees	None	None

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

The authors have no conflicts of interest to declare.

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

Date:	2021-09-29
Your Name:	Fengjiao Long
Manuscript Title: Correlation	n research between fear of disease progression and quality of life in
patients with lung cance	
Manuscript number (if known	-

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10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None	None
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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	None
13	Other financial or non- financial interests	None	None

The authors have no conflicts of interest to declare.

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

Date:	2021-09-29	
Your Name:	Hui Chen	
Manuscript Title: Correlation	research between fear of disease progression and quality of	<u>f life in</u>
patients with lung cancer		
Manuscript number (if known):		

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3	Royalties or licenses	None	None
4	Consulting fees	None	None

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None	None
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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	None
13	Other financial or non- financial interests	None	None

The authors have no conflicts of interest to declare.

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

Date:	2021-09-29	
Your Name:	Ying Huang	
Manuscript Title: Correlation	research between fear of disease	progression and quality of life in
patients with lung cancer		
Manuscript number (if known):		

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13	Other financial or non- financial interests	None	None

The authors have no conflicts of interest to declare.

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

Date:	2021-09-29	
Your Name:	Lanman He	_
Manuscript Title: Correlation	on research between fear of disease progression and quality of	life in
patients with lung cance	r	
Manuscript number (if know	_	

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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	None
13	Other financial or non- financial interests	None	None

The authors have no conflicts of interest to declare.

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

Date:	2021-09-29	
Your Name:	Lin Chen	
Manuscript Title: Correlation	<u>ı research between fear of disease progression and quality c</u>	of life in
patients with lung cancer		
Manuscript number (if known)	:	

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13	Other financial or non- financial interests	None	None

The authors have no conflicts of interest to declare.

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

Date:	2021-09-29	
Your Name:	_Lipin Xie	
Manuscript Title: Correlation	research between fear of disease progres	ssion and quality of life in
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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	None
13	Other financial or non- financial interests	None	None

The authors have no conflicts of interest to declare.

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

Date:	2021-09-29	
Your Name:	Jinxiao Li	
Manuscript Title: Correlation	<u>1 research between fear of disease progression and quality</u>	of life in
patients with lung cancer		
Manuscript number (if known):	:	

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

Date:	2021-09-29	
Your Name:	Yuanling Luo	
Manuscript Title: Correlation	research between fear of disease progress	sion and quality of life in
patients with lung cancer		
Manuscript number (if known):		

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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	None
13	Other financial or non- financial interests	None	None

The authors have no conflicts of interest to declare.

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

Date:	2021-09-29
Your Name:	Hongmei Tao
Manuscript Title: Correlatio	n research between fear of disease progression and quality of life in
patients with lung cancer	
Manuscript number (if known	

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