

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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Section 1. Identifying Inform	ation	
1. Given Name (First Name) Yan	2. Surname (Last Name) Deng	3. Date 20-March-2020
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Name Xiao-Ming Zhang
5. Manuscript Title Magnetic resonance imaging for preop	erative staging of pancrea	atic cancer based on the 8th edition of AJCC guidelines
6. Manuscript Identifying Number (if you kr JGO-20-6	now it)	
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Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes 🖌 No



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Dr. Deng has nothing to disclose.

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Dr. Ming has nothing to disclose.

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1. Given Name (First Name) Jia Long	2. Surname (Last Name) Wu		3. Date 20-March-2020
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5. Manuscript Title			
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2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

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Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

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Definitions.

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Section 1. Identifying Inform	nation		
1. Given Name (First Name) Chuan	2. Surname (Last Name) Lan		3. Date 20-March-2020
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Na Xiao-Ming Zhang	me
5. Manuscript Title Magnetic resonance imaging for preop	erative staging of pancrea	atic cancer based on the 8th	edition of AJCC guidelines
6. Manuscript Identifying Number (if you kr JGO-20-6	now it)		
Section 2. The Work Under C	onsideration for Publi	cation	
Did you or your institution at any time rece any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	g but not limited to grants, d		•
Section 3. Relevant financial	activities outside the	submitted work.	
Place a check in the appropriate boxes i of compensation) with entities as descr clicking the "Add +" box. You should re Are there any relevant conflicts of intere	ibed in the instructions. U port relationships that we	se one line for each entity; a	idd as many lines as you need by

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?		Yes	V No	С
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Dr. Lan has nothing to disclose.

Evaluation and Feedback



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Section 1.	Identifying Infor	mation	
1. Given Name (F Xiao Ming	irst Name)	2. Surname (Last Name) Zhang	3. Date 20-March-2020
4. Are you the corresponding author?		✓ Yes No	
5. Manuscript Tit Magnetic reson		perative staging of pancreatic cancer base	d on the 8th edition of AJCC guidelines
6. Manuscript Ide JGO-20-6	entifying Number (if you	know it)	
Section 2.			
Section 2.	The Work Under	Consideration for Publication	
	submitted work (includi	ceive payment or services from a third party (go ng but not limited to grants, data monitoring bo	overnment, commercial, private foundation, etc.) for oard, study design, manuscript preparation,

	Are there any	relevant conflicts of interest?	Yes	\checkmark	No
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Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were **present during the 36 months prior to publication**.

Are there any relevant conflicts of interest?	Yes	\checkmark	No
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?	Yes	🖌 No	
		•	



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