

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name) Kai	2. Surname (Last Name) Liu	3. Date 15-January-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Cui Wang
5. Manuscript Title Prognosis model of colorectal cancer patients based on NOTCH3, KMT2C, and CREBBP mutations		
6. Manuscript Identifying Number (if you know it) JGO-21-28		

Section 2. The Work Under Consideration for Publication

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Dr. Liu has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Jiefu	2. Surname (Last Name) Wang	3. Date 15-January-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Cui Wang
5. Manuscript Title Prognosis model of colorectal cancer patients based on NOTCH3, KMT2C, and CREBBP mutations		
6. Manuscript Identifying Number (if you know it) JGO-21-28		

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Dr. Wang has nothing to disclose.

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5. Manuscript Title Prognosis model of colorectal cancer patients based on NOTCH3, KMT2C, and CREBBP mutations		
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Cui

2. Surname (Last Name)

Wang

3. Date

15-January-2021

4. Are you the corresponding author?

Yes No

5. Manuscript Title

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