

ICMJE Form for Disclosure of Potential Conflicts of Interest

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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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Ning	2. Surname (Last Name) Liu	3. Date 24-September-2016
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Jun Liang
5. Manuscript Title Programmed death 1 induces cell chemoresistance to 5-fluorouracil in gastric cancer cell lines		
6. Manuscript Identifying Number (if you know it) 		

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Dr. Liu has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Jing

2. Surname (Last Name)

Lv

3. Date

24-September-2016

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Jun Liang

5. Manuscript Title

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Section 1. Identifying Information

1. Given Name (First Name)

Weiwei

2. Surname (Last Name)

Qi

3. Date

24-September-2016

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Jun Liang

5. Manuscript Title

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1. Given Name (First Name) Libin	2. Surname (Last Name) Sun	3. Date 24-September-2016
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Jun Liang
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Section 1. Identifying Information

1. Given Name (First Name)
Shufen

2. Surname (Last Name)
Zhao

3. Date
24-September-2016

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Jun Liang

5. Manuscript Title
Programmed death 1 induces cell chemoresistance to 5-fluorouracil in gastric cancer cell lines

6. Manuscript Identifying Number (if you know it)

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1. Given Name (First Name)

Wensheng

2. Surname (Last Name)

Qiu

3. Date

24-September-2016

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☐ Yes

☒ No

Corresponding Author's Name

Jun Liang

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1. Given Name (First Name)

Jun

2. Surname (Last Name)

Liang

3. Date

24-September-2016

4. Are you the corresponding author?

☒ Yes ☐ No

5. Manuscript Title

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