

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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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Sang-Yun

2. Surname (Last Name)
Song

3. Date
07-April-2017

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Young-Chul Kim

5. Manuscript Title
Angiogenesis inhibitors for small cell lung cancer

6. Manuscript Identifying Number (if you know it)

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Dr. Song has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)
Cheol-Kyu

2. Surname (Last Name)
Park

3. Date
07-April-2017

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Young-Chul Kim

5. Manuscript Title
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Section 1. Identifying Information

1. Given Name (First Name) In-Jae	2. Surname (Last Name) Oh	3. Date 07-April-2017
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Young-Chul Kim
5. Manuscript Title Angiogenesis inhibitors for small cell lung cancer		
6. Manuscript Identifying Number (if you know it) 		

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Young-Chul

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Kim

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07-April-2017

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