

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Hui

2. Surname (Last Name)  
Wang

3. Date  
01-November-2017

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Chaozhao Liang

5. Manuscript Title

Integrated formulas to forecast prostate cancer: the parameters of influencing the prostate specific antigen level as an adjunct to prostate specific antigen and multi-parametric MRI to predict prostate cancer before biopsy

6. Manuscript Identifying Number (if you know it)

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Dr. Wang has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Sheng	2. Surname (Last Name) Tai	3. Date 01-November-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Chaozhao Liang
5. Manuscript Title Integrated formulas to forecast prostate cancer: the parameters of influencing the prostate specific antigen level as an adjunct to prostate specific antigen and multi-parametric MRI to predict prostate cancer before biopsy		
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Chaozhao

2. Surname (Last Name)  
Liang

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01-November-2017

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