

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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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) Anthony J.	2. Surname (Last Name) Paravati	3. Date 11-December-2013
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jona Hattangadi-Gluth
5. Manuscript Title Stereotactic body radiation therapy for primary hepatic malignancies and liver metastases		
6. Manuscript Identifying Number (if you know it)		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Paravati has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Erin	2. Surname (Last Name) Healy	3. Date 11-December-2013
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jona Hattangadi-Gluth
5. Manuscript Title Stereotactic body radiation therapy for primary hepatic malignancies and liver metastases		
6. Manuscript Identifying Number (if you know it)		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

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Dr. Healy has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) James D.	2. Surname (Last Name) Murphy	3. Date 11-December-2013
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jona Hattangadi-Gluth
5. Manuscript Title Stereotactic body radiation therapy for primary hepatic malignancies and liver metastases		
6. Manuscript Identifying Number (if you know it)		

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1. Given Name (First Name) William	2. Surname (Last Name) Song	3. Date 11-December-2013
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jona Hattangadi-Gluth
5. Manuscript Title Stereotactic body radiation therapy for primary hepatic malignancies and liver metastases		
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Section 1. Identifying Information

1. Given Name (First Name)

Jona

2. Surname (Last Name)

Hattangadi-Gluth

3. Date

11-December-2013

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Stereotactic body radiation therapy for primary hepatic malignancies and liver metastases

6. Manuscript Identifying Number (if you know it)

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