

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.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Lining

2. Surname (Last Name)
Wang

3. Date
07-April-2019

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Erlin Sun

5. Manuscript Title

A retrospective analysis of the correlation between AXL expression and clinical outcomes of patients with urothelial bladder carcinoma

6. Manuscript Identifying Number (if you know it)

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Section 6. Disclosure Statement

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Dr. Wang has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Kangkang	2. Surname (Last Name) Liu	3. Date 07-April-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Erlin Sun
5. Manuscript Title A retrospective analysis of the correlation between AXL expression and clinical outcomes of patients with urothelial bladder carcinoma		
6. Manuscript Identifying Number (if you know it)		

Section 2. The Work Under Consideration for Publication

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Section 1. Identifying Information

1. Given Name (First Name)
Jianpeng

2. Surname (Last Name)
Yu

3. Date
07-April-2019

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Erlin Sun

5. Manuscript Title

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Erin

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Sun

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07-April-2019

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