

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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2. The work under consideration for publication.

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4. Intellectual Property.

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

5. Relationships not covered above.

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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)
Daniel Sampaio

2. Surname (Last Name)
Vieira

3. Date
26-June-2019

4. Are you the corresponding author? Yes No

5. Manuscript Title
Evaluation of acute skin toxicity during radiotherapy for breast cancer in elderly patients

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

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Section 6. Disclosure Statement

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Dr. Vieira has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

| | | |
|--|---|--|
| 1. Given Name (First Name) Marcio Lemberg | 2. Surname (Last Name) Reisner | 3. Date 26-June-2019 |
| 4. Are you the corresponding author? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name Daniel Sampaio Vieira |
| 5. Manuscript Title Evaluation of acute skin toxicity during radiotherapy for breast cancer in elderly patients | | |
| 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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Dr. Reisner has nothing to disclose.

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| | | |
|--|---|--|
| 1. Given Name (First Name) Juliana Depra | 2. Surname (Last Name) Panichella | 3. Date 26-June-2019 |
| 4. Are you the corresponding author? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name Daniel Sampaio Vieira |
| 5. Manuscript Title Evaluation of acute skin toxicity during radiotherapy for breast cancer in elderly patients | | |
| 6. Manuscript Identifying Number (if you know it) _____ | | |

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Section 1. Identifying Information

1. Given Name (First Name)

Isabella Peixoto

2. Surname (Last Name)

Barbosa

3. Date

26-June-2019

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Daniel Sampaio Vieira

5. Manuscript Title

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