

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)

Devyani

2. Surname (Last Name)

Bhatkar

3. Date

05-March-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Dr. NILESH KUMAR SHARMA

5. Manuscript Title

CRISPR-Cas genome editing tool: a narrow lane of cancer therapeutics with potential blockades

6. Manuscript Identifying Number (if you know it)

TCR-2019-OPC-002

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Dr. Bhatkar has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Sachin C.	2. Surname (Last Name) Sarode	3. Date 05-March-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Dr. NILESH KUMAR SHARMA
5. Manuscript Title CRISPR-Cas genome editing tool: a narrow lane of cancer therapeutics with potential blockades		
6. Manuscript Identifying Number (if you know it) TCR-2019-OPC-002		

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Dr. Sarode has nothing to disclose.

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1. Given Name (First Name) Gargi S.	2. Surname (Last Name) Sarode	3. Date 05-March-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Dr. NILESH KUMAR SHARMA
5. Manuscript Title CRISPR-Cas genome editing tool: a narrow lane of cancer therapeutics with potential blockades		
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1. Given Name (First Name) Shankargouda	2. Surname (Last Name) Patil	3. Date 05-March-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Dr. Nilesh Kumar Sharma
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NILESH KUMAR

2. Surname (Last Name)
SHARMA

3. Date
05-March-2020

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