

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)
Huamin

2. Surname (Last Name)
Zhai

3. Date
28-April-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Yao Jie

5. Manuscript Title
Mortality from heart disease following radiotherapy in esophageal carcinoma: a retrospective cohort study in US SEER cancer registry

6. Manuscript Identifying Number (if you know it)
TCR-19-2476

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Dr. Zhai has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Ya	2. Surname (Last Name) Huang	3. Date 28-April-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Yao Jie
5. Manuscript Title Mortality from heart disease following radiotherapy in esophageal carcinoma: a retrospective cohort study in US SEER cancer registry		
6. Manuscript Identifying Number (if you know it) TCR-19-2476		

Section 2. The Work Under Consideration for Publication

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Dr. Huang has nothing to disclose.

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1. Given Name (First Name) Ling	2. Surname (Last Name) Li	3. Date 28-April-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Yao Jie
5. Manuscript Title Mortality from heart disease following radiotherapy in esophageal carcinoma: a retrospective cohort study in US SEER cancer registry		
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