

## 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) Beibei	2. Surname (Last Name) Tan	3. Date 15-May-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Boxun Chen
5. Manuscript Title Application value of 18F-FDG PETCT imaging in the clinical initial diagnosis and follow-up of primary lesions of cervical cancer		
6. Manuscript Identifying Number (if you know it)		

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1. Given Name (First Name) Jinglan	2. Surname (Last Name) Guo	3. Date 15-May-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Boxun Chen
5. Manuscript Title Application value of 18F-FDG PETCT imaging in the clinical initial diagnosis and follow-up of primary lesions of cervical cancer		
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Dr. Guo has nothing to disclose.

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1. Given Name (First Name)

Lisha

2. Surname (Last Name)

Wang

3. Date

15-May-2020

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Boxun Chen

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Wang

3. Date

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No

Corresponding Author's Name

Boxun Chen

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