

ICMJE DISCLOSURE FORM

Date: 2021/8/3
 Your Name: Xiang Zhang
 Manuscript Title: Surgery followed by concurrent radiochemotherapy as treatment for patients with locally recurrent cervical cancer
 Manuscript number (if known): TCR-21-1163

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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Time frame: Since the initial planning of the work			
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Please summarize the above conflict of interest in the following box:

None.

Please place an "X" next to the following statement to indicate your agreement:

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

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Date: 2021/8/3
 Your Name: Zhongbo Chen
 Manuscript Title: Surgery followed by concurrent radiochemotherapy as treatment for patients with locally recurrent cervical cancer
 Manuscript number (if known): TCR-21-1163

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Date: 2021/8/3

Your Name: Jianhong Chen

Manuscript Title: Surgery followed by concurrent radiochemotherapy as treatment for patients with locally recurrent cervical cancer

Manuscript number (if known): TCR-21-1163

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Date: 2021/8/3
 Your Name: Junjian Wang
 Manuscript Title: Surgery followed by concurrent radiochemotherapy as treatment for patients with locally recurrent cervical cancer
 Manuscript number (if known): TCR-21-1163

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 Your Name: Yingchang Wang
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