

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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#### 2. The work under consideration for publication.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Glenn

2. Surname (Last Name)  
Jenkins

3. Date  
10-May-2019

4. Are you the corresponding author?  Yes  No

5. Manuscript Title  
RNF8 is associated with radioresistance, nodal stage and extranodal spread in oral cavity squamous-cell carcinoma

6. Manuscript Identifying Number (if you know it)

### Section 2. The Work Under Consideration for Publication

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Dr. Jenkins has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Duncan

2. Surname (Last Name)

Lambie

3. Date

10-May-2019

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

Glenn Jenkins

5. Manuscript Title

RNF8 is associated with radioresistance, nodal stage and extranodal spread in oral cavity squamous-cell carcinoma

6. Manuscript Identifying Number (if you know it)

### Section 2. The Work Under Consideration for Publication

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Dr. Lambie has nothing to disclose.

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1. Given Name (First Name)  
Derek

2. Surname (Last Name)  
Richard

3. Date  
10-May-2019

4. Are you the corresponding author?  Yes  No

Corresponding Author's Name  
Glenn Jenkins

5. Manuscript Title  
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1. Given Name (First Name)  
Ben

2. Surname (Last Name)  
Panizza

3. Date  
10-May-2019

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Corresponding Author's Name  
Glenn Jenkins

5. Manuscript Title  
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