

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Shannon

2. Surname (Last Name)
Graham

3. Date
09-October-2019

4. Are you the corresponding author? Yes No

5. Manuscript Title
Sociodemographic disparities in access to ovarian cancer treatment

6. Manuscript Identifying Number (if you know it)
ACE-19-18

Section 2. The Work Under Consideration for Publication

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Dr. Graham has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Elaine	2. Surname (Last Name) Hallisey	3. Date 09-October-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Shannon Graham
5. Manuscript Title Sociodemographic disparities in access to ovarian cancer treatment		
6. Manuscript Identifying Number (if you know it) ACE-19-18		

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Dr. Hallisey has nothing to disclose.

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1. Given Name (First Name)
Grete

2. Surname (Last Name)
Wilt

3. Date
09-October-2019

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Shannon Graham

5. Manuscript Title
Sociodemographic disparities in access to ovarian cancer treatment

6. Manuscript Identifying Number (if you know it)
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Dr. Wilt has nothing to disclose.

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1. Given Name (First Name) Barry	2. Surname (Last Name) Flanagan	3. Date 09-October-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Shannon Graham
5. Manuscript Title Sociodemographic disparities in access to ovarian cancer treatment		
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1. Given Name (First Name) Juan L.	2. Surname (Last Name) Rodriguez	3. Date 09-October-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Shannon Graham
5. Manuscript Title Sociodemographic disparities in access to ovarian cancer treatment		
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4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Shannon Graham
5. Manuscript Title Sociodemographic disparities in access to ovarian cancer treatment		
6. Manuscript Identifying Number (if you know it) ACE-19-18		

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Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

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Dr. Peipins has nothing to disclose.

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