

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) Guan Hee	2. Surname (Last Name) Tan	3. Date 22-April-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Gregory Nason
5. Manuscript Title Radical cystectomy- what is the optimal surgical approach?		
6. Manuscript Identifying Number (if you know it)		

Section 2. The Work Under Consideration for Publication

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Section 6. Disclosure Statement

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Dr. Tan has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)
Gregory

2. Surname (Last Name)
Nason

3. Date
22-April-2020

4. Are you the corresponding author? Yes No

5. Manuscript Title
Radical cystectomy- what is the optimal surgical approach?

6. Manuscript Identifying Number (if you know it)
TAU-20-880

Section 2. The Work Under Consideration for Publication

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Dr. Nason has nothing to disclose.

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1. Given Name (First Name)

Girish

2. Surname (Last Name)

Kulkarni

3. Date

22-April-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Gregory Nason

5. Manuscript Title

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