

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) Kit	2. Surname (Last Name) Shing	3. Date 14-July-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Thomas Yau
5. Manuscript Title Sorafenib plus Doxorubicin in Advanced Hepatocellular Carcinoma Patients: Hope or Hype?		
6. Manuscript Identifying Number (if you know it) ATM-2020-130		

Section 2. The Work Under Consideration for Publication

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Dr. Shing has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Gin Wai

2. Surname (Last Name)

Kwok

3. Date

14-July-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Thomas Yau

5. Manuscript Title

Sorafenib plus Doxorubicin in Advanced Hepatocellular Carcinoma Patients: Hope or Hype?

6. Manuscript Identifying Number (if you know it)

ATM-2020-130

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Dr. Kwok has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Joanne

2. Surname (Last Name)

Chiu

3. Date

14-July-2020

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

5. Manuscript Title

Sorafenib plus Doxorubicin in Advanced Hepatocellular Carcinoma Patients: Hope or Hype?

6. Manuscript Identifying Number (if you know it)

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Section 1. Identifying Information

1. Given Name (First Name) Tan To	2. Surname (Last Name) Cheung	3. Date 07-July-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Thomas Yau
5. Manuscript Title Sorafenib plus Doxorubicin in Advanced Hepatocellular Carcinoma Patients: Hope or Hype?		
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Thomas

2. Surname (Last Name)

Yau

3. Date

14-July-2020

4. Are you the corresponding author?

Yes No

5. Manuscript Title

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