

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) Fangqiu	2. Surname (Last Name) Fu	3. Date 27-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Haiquan Chen and Yang Zhang
5. Manuscript Title Lung Cancer Screening Strategy for Non-high Risk Individuals: A Narrative Review		
6. Manuscript Identifying Number (if you know it) TLCR-20-943-CL		

Section 2. The Work Under Consideration for Publication

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. Fu has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)
Yaodong

2. Surname (Last Name)
Zhou

3. Date
27-September-2020

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Haiquan Chen and Yang Zhang

5. Manuscript Title
Lung Cancer Screening Strategy for Non-high Risk Individuals: A Narrative Review

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Yang

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Zhang

3. Date
27-September-2020

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