

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.

5. Relationships not covered above.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Hye Ri	2. Surname (Last Name) Han	3. Date 27-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Dr. Anurag K Singh
5. Manuscript Title Matched pair analysis to evaluate weight loss during radiation therapy for head and neck cancer as a prognostic factor for survival		
6. Manuscript Identifying Number (if you know it)		

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Dr. Han has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Gregory

2. Surname (Last Name)
Hermann

3. Date
27-June-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Dr. Anurag K Singh

5. Manuscript Title

Matched pair analysis to evaluate weight loss during radiation therapy for head and neck cancer as a prognostic factor for survival

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Dr. Hermann has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Sung Jun

2. Surname (Last Name)

Ma

3. Date

27-June-2020

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Dr. Anurag K Singh

5. Manuscript Title

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1. Given Name (First Name) Austin	2. Surname (Last Name) Ivoli	3. Date 27-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Dr. Anurag K Singh
5. Manuscript Title Matched pair analysis to evaluate weight loss during radiation therapy for head and neck cancer as a prognostic factor for survival		
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Dr. Iovoli has nothing to disclose.

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1. Given Name (First Name) Kimberly	2. Surname (Last Name) Wooten	3. Date 27-June-2020
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1. Given Name (First Name) Hassan	2. Surname (Last Name) Arshad	3. Date 27-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Dr. Anurag K Singh
5. Manuscript Title Matched pair analysis to evaluate weight loss during radiation therapy for head and neck cancer as a prognostic factor for survival		
6. Manuscript Identifying Number (if you know it) _____		

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.)?

Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Arshad 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)

Vishal

2. Surname (Last Name)

Gupta

3. Date

27-June-2020

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Dr. Anurag K Singh

5. Manuscript Title

Matched pair analysis to evaluate weight loss during radiation therapy for head and neck cancer as a prognostic factor for survival

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest?

Yes

No

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Yes

No

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Yes

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Dr. Gupta has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Ryan

2. Surname (Last Name)

McSpadden

3. Date

27-June-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Dr. Anurag K Singh

5. Manuscript Title

Matched pair analysis to evaluate weight loss during radiation therapy for head and neck cancer as a prognostic factor for survival

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. McSpadden has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Moni	2. Surname (Last Name) Kuriakose	3. Date 27-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Dr. Anurag K Singh
5. Manuscript Title Matched pair analysis to evaluate weight loss during radiation therapy for head and neck cancer as a prognostic factor for survival		
6. Manuscript Identifying Number (if you know it)		

Section 2. The Work Under Consideration for Publication

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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Kuriakose has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Michael	2. Surname (Last Name) Markiewicz	3. Date 27-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Dr. Anurag K Singh
5. Manuscript Title Matched pair analysis to evaluate weight loss during radiation therapy for head and neck cancer as a prognostic factor for survival		
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Dr. Markiewicz has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name) Jon	2. Surname (Last Name) Chan	3. Date 27-June-2020
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Dr. Chan has nothing to disclose.

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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) Mary	2. Surname (Last Name) Platek	3. Date 27-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Dr. Anurag K Singh
5. Manuscript Title Matched pair analysis to evaluate weight loss during radiation therapy for head and neck cancer as a prognostic factor for survival		
6. Manuscript Identifying Number (if you know it)		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Platek has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Andrew	2. Surname (Last Name) Ray	3. Date 27-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Dr. Anurag K Singh
5. Manuscript Title Matched pair analysis to evaluate weight loss during radiation therapy for head and neck cancer as a prognostic factor for survival		
6. Manuscript Identifying Number (if you know it)		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Section 6. Disclosure Statement

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Dr. Ray has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Fangyi

2. Surname (Last Name)

Gu

3. Date

27-June-2020

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Dr. Anurag K Singh

5. Manuscript Title

Matched pair analysis to evaluate weight loss during radiation therapy for head and neck cancer as a prognostic factor for survival

6. Manuscript Identifying Number (if you know it)

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Yes

No

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Are there any relevant conflicts of interest?

Yes

No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?

Yes

No

ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Gu has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Wesley	2. Surname (Last Name) Hicks	3. Date 27-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Dr. Anurag K Singh
5. Manuscript Title Matched pair analysis to evaluate weight loss during radiation therapy for head and neck cancer as a prognostic factor for survival		
6. Manuscript Identifying Number (if you know it) _____		

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1. Given Name (First Name) Anurag	2. Surname (Last Name) Singh	3. Date 27-June-2020
4. Are you the corresponding author?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
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