

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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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) Pei-Hsuan	2. Surname (Last Name) Lee	3. Date 16-April-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Yu-Hsuan Chen
5. Manuscript Title A Single Institution Experience of Total Lymphoid Irradiation using Helical Tomotherapy as part of the Conditioning Regimen of Transplantation for Severe Aplastic Anemia Patients		
6. Manuscript Identifying Number (if you know it) TRO-19-86		

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Dr. Lee has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Jian-Kuen	2. Surname (Last Name) Wu	3. Date 16-April-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Yu-Hsuan Chen
5. Manuscript Title A Single Institution Experience of Total Lymphoid Irradiation using Helical Tomotherapy as part of the Conditioning Regimen of Transplantation for Severe Aplastic Anemia Patients		
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Section 1. Identifying Information

1. Given Name (First Name)
Miao-Ci

2. Surname (Last Name)
Wang

3. Date
16-April-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Yu-Hsuan Chen

5. Manuscript Title
A Single Institution Experience of Total Lymphoid Irradiation using Helical Tomotherapy as part of the Conditioning Regimen of Transplantation for Severe Aplastic Anemia Patients

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Sung-Hsin

2. Surname (Last Name)

Kuo

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16-April-2020

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Yes

No

Corresponding Author's Name

Yu-Hsuan Chen

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Licensed: The patent has been licensed to an entity, whether earning royalties or not

Royalties: Funds are coming in to you or your institution due to your patent

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Section 1. Identifying Information

1. Given Name (First Name)
Yu-Hsuan

2. Surname (Last Name)
Chen

3. Date
16-April-2020

4. Are you the corresponding author? Yes No

5. Manuscript Title
A Single Institution Experience of Total Lymphoid Irradiation using Helical Tomotherapy as part of the Conditioning Regimen of Transplantation for Severe Aplastic Anemia Patients

6. Manuscript Identifying Number (if you know it)
TRO-19-86

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

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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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Dr. Chen has nothing to disclose.

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