ICMJE Form for Disclosure of Potential Conflicts of Interest

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Xin

2. Surname (Last Name)  
   Huang

3. Date  
   20-August-2020

4. Are you the corresponding author?  
   ☑ No

Corresponding Author's Name  
Qiang Sun

5. Manuscript Title  
   Sentinel lymph node biopsy should be considered for clinically node-negative breast cancer regardless of BRCA1/2 status

6. Manuscript Identifying Number (if you know it)

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Dr. Huang has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Jia-Qi

2. Surname (Last Name)  
   Liu

3. Date  
   20-August-2020

4. Are you the corresponding author?  
   ☑ No

   Corresponding Author's Name  
   Qiang Sun

5. Manuscript Title  
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Section 1. Identifying Information

1. Given Name (First Name)  
Yi-Dong

2. Surname (Last Name)  
Zhou

3. Date  
20-August-2020

4. Are you the corresponding author?  
☐ Yes  ☑ No

Corresponding Author's Name  
Qiang Sun

5. Manuscript Title  
Sentinel lymph node biopsy should be considered for clinically node-negative breast cancer regardless of BRCA1/2 status

6. Manuscript Identifying Number (if you know it)

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### Section 1. Identifying Information

| 1. Given Name (First Name) | 2. Surname (Last Name) | 3. Date |
|--------------------------|------------------------|--------|
| Ying                     | Xu                     | 20-August-2020 |

4. Are you the corresponding author? □ Yes  ✔ No

Corresponding Author's Name
Qiang Sun

5. Manuscript Title
Sentinel lymph node biopsy should be considered for clinically node-negative breast cancer regardless of BRCA1/2 status

6. Manuscript Identifying Number (if you know it)

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Section 1. Identifying Information

1. Given Name (First Name) Chang
2. Surname (Last Name) Chen
3. Date 20-August-2020
4. Are you the corresponding author? ☑ No
5. Manuscript Title Sentinel lymph node biopsy should be considered for clinically node-negative breast cancer regardless of BRCA1/2 status

Section 2. The Work Under Consideration for Publication

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Section 1. Identifying Information

1. Given Name (First Name)  
   Xiang

2. Surname (Last Name)  
   Wang

3. Date  
   20-August-2020

4. Are you the corresponding author?  
   Yes ☐  No ☑

   Corresponding Author's Name  
   Qiang Sun

5. Manuscript Title  
   Sentinel lymph node biopsy should be considered for clinically node-negative breast cancer regardless of BRCA1/2 status

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?  
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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?  
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ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Wang 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)  
   Xi

2. Surname (Last Name)  
   Cao

3. Date  
   20-August-2020

4. Are you the corresponding author?  
   ☒ No

Corresponding Author's Name
   Qiang Sun

5. Manuscript Title
   Sentinel lymph node biopsy should be considered for clinically node-negative breast cancer regardless of BRCA1/2 status

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

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Dr. Cao has nothing to disclose.

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Yao
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Ru
2. Surname (Last Name)  Yao
3. Date  20-August-2020
4. Are you the corresponding author?  Yes  No  ✔
5. Manuscript Title  Sentinel lymph node biopsy should be considered for clinically node-negative breast cancer regardless of BRCA1/2 status
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  ✔

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Sun
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) 
   Qiang

2. Surname (Last Name) 
   Sun

3. Date 
   20-August-2020

4. Are you the corresponding author? 
   Yes ☑  No

5. Manuscript Title 
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6. Manuscript Identifying Number (if you know it)

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