ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name)  
   Jia

2. Surname (Last Name)  
   Gu

3. Date  
   29-March-2020

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

   Corresponding Author’s Name  
   Ning Zhao

5. Manuscript Title  
   Prognostic factors for laryngeal sarcoma and nomogram development for prediction: a retrospective study based on SEER database

6. Manuscript Identifying Number (if you know it)

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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)  Zhifan
2. Surname (Last Name)  Zuo
3. Date  29-March-2020
4. Are you the corresponding author?  Yes  No
   Corresponding Author’s Name  Ning Zhao
5. Manuscript Title
   Prognostic factors for laryngeal sarcoma and nomogram development for prediction: a retrospective study based on SEER database
6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Dr. Zuo has nothing to disclose.

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Section 1. Identifying Information

| 1. Given Name (First Name) | Lei |
|---------------------------|----|
| 2. Surname (Last Name)    | Sun |
| 3. Date                   | 29-March-2020 |
| 4. Are you the corresponding author? | Yes ☑ No |
| Corresponding Author’s Name | Ning Zhao |

5. Manuscript Title
Prognostic factors for laryngeal sarcoma and nomogram development for prediction: a retrospective study based on SEER database

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Section 1. **Identifying Information**

1. Given Name (First Name)  
   Li

2. Surname (Last Name)  
   Li

3. Date  
   29-March-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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|-----------------------------|------------------------|---------------|
| Ning                        | Zhao                   | 29-March-2020 |

4. Are you the corresponding author?  
   ✓ Yes  
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