ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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<table>
<thead>
<tr>
<th>1. Given Name (First Name)</th>
<th>2. Surname (Last Name)</th>
<th>3. Date</th>
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<tbody>
<tr>
<td>Daniel</td>
<td>Brungs</td>
<td>06-May-2020</td>
</tr>
</tbody>
</table>

4. Are you the corresponding author?  
   - Yes  
   - No

5. Manuscript Title  
   High BMI is associated with an increased overall survival in rectal cancer

6. Manuscript Identifying Number (if you know it)  
   JGO-20-48

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Dr. Brungs has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
Glaucia

2. Surname (Last Name)  
Fylyk

3. Date  
05-May-2020

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☐ Yes  ☑ No

Corresponding Author’s Name  
Dr Karolina Juszyck

5. Manuscript Title  
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6. Manuscript Identifying Number (if you know it)  
JGO-20-48

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Section 1. Identifying Information

1. Given Name (First Name)  James
2. Surname (Last Name)  Chen
3. Date  06-May-2020

4. Are you the corresponding author?  ☑ No

Corresponding Author's Name  Karolina Juszczyn

5. Manuscript Title  High BMI is associated with an increased overall survival in rectal cancer

6. Manuscript Identifying Number (if you know it)  JGO-20-48

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Section 1. Identifying Information

1. Given Name (First Name)  
   Karolina

2. Surname (Last Name)  
   Juszczyk

3. Date  
   05-June-2020

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

5. Manuscript Title  
   High BMI is associated with an increased overall survival in rectal cancer

6. Manuscript Identifying Number (if you know it)

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Dr. Juszczyk has nothing to disclose.

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Morteza

2. Surname (Last Name)  
Aghmesheh

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05-May-2020

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Dr Karolina Juszczyk

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Dr. has nothing to disclose.

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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)  Robert
2. Surname (Last Name)  Winn
3. Date  06-May-2020

4. Are you the corresponding author?  [ ] Yes  [ ] No

Corresponding Author’s Name

5. Manuscript Title
High BMI is associated with an increased overall survival in rectal cancer

6. Manuscript Identifying Number (if you know it)
JGO-20-48

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

Dr. Winn has nothing to disclose.

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1. **Identifying information.**

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   This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party — that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

3. **Relevant financial activities outside the submitted work.**
   
   This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

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   For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

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Section 1. Identifying Information

1. Given Name (First Name)          2. Surname (Last Name)          3. Date
Sharlyn                             Kang                               30-April-2020

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

Corresponding Author's Name
Karolina Juszczyszyn

5. Manuscript Title
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Soni

2. Surname (Last Name)  
   Putnis

3. Date  
   05-October-2020

4. Are you the corresponding author?  
   [ ] Yes  [x] No

   Corresponding Author’s Name  
   Karolina Juszczyk

5. Manuscript Title  
   High BMI is associated with an increased overall survival in rectal cancer

6. Manuscript Identifying Number (if you know it)  

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