ICMJE Form for Disclosure of Potential Conflicts of Interest

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Section 1. Identifying Information

1. Given Name (First Name)  
   Shingo

2. Surname (Last Name)  
   Hatakeyama

3. Date  
   10-August-2020

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

5. Manuscript Title  
   Narrative Review of Urinary Glycan Biomarkers in Prostate Cancer

6. Manuscript Identifying Number (if you know it)  
   TAU-20-964

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?  
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   ☑ Yes  ☐ No

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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**Section 6. Disclosure Statement**

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Dr. Hatakeyama has nothing to disclose.

**Evaluation and Feedback**

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

Yoneyama
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) 
   Tohru

2. Surname (Last Name) 
   Yoneyama

3. Date 
   10-August-2020

4. Are you the corresponding author? 
   No

Corresponding Author’s Name 
Shingo Hatakeyama

5. Manuscript Title 
Narrative Review of Urinary Glycan Biomarkers in Prostate Cancer

6. Manuscript Identifying Number (if you know it) 
TAU-20-964

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? 
No

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No
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Section 6. Disclosure Statement

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Dr. Yoneyama has nothing to disclose.

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   Yuki

2. Surname (Last Name)  
   Tobisawa

3. Date  
   10-August-2020

4. Are you the corresponding author?  
   No

Corresponding Author's Name  
   Shingo Hatakeyama

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Dr. Tobisawa has nothing to disclose.

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<td>Hayato</td>
<td>Yamamoto</td>
<td>10-August-2020</td>
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4. Are you the corresponding author? [ ] Yes [ ] No

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<td>Shingo Hatakeyama</td>
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5. Manuscript Title
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6. Manuscript Identifying Number (if you know it)
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Dr. Yamamoto has nothing to disclose.

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Chikara

2. Surname (Last Name)  
Ohyama

3. Date  
10-August-2020

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☐ Yes  ✔ No

Corresponding Author's Name  
Shingo Hatakeyama

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