ICMJE Form for Disclosure of Potential Conflicts of Interest

**Instructions**

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ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 1. Identifying Information**

1. Given Name (First Name)  
   Dechao

2. Surname (Last Name)  
   Feng

3. Date  
   16-April-2020

4. Are you the corresponding author?  
   ☑ Yes  ☐ No  
   Corresponding Author's Name  
   Wuran Wei; Ping Han

5. Manuscript Title  
   Clinicopathological characteristics and treatment outcomes of 162 Chinese patients with metastatic bladder cancer: Results from a tertiary teaching hospital

6. Manuscript Identifying Number (if you know it)  
   TCR-20-737

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Dr. Feng has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)  
   Yunjin

2. Surname (Last Name)  
   Bai

3. Date  
   16-April-2020

4. Are you the corresponding author?  
   ☑ No

   Corresponding Author's Name  
   Wuran Wei; Ping Han

5. Manuscript Title  
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6. Manuscript Identifying Number (if you know it)  
   TCR-20-737

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Dr. Bai has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Yubo

2. Surname (Last Name)  
   Yang

3. Date  
   16-April-2020

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

Corresponding Author’s Name  
Wuran Wei; Ping Han

5. Manuscript Title  
Clinicopathological characteristics and treatment outcomes of 162 Chinese patients with metastatic bladder cancer: Results from a tertiary teaching hospital

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TCR-20-737

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Section 1. Identifying Information

1. Given Name (First Name)  Ping
2. Surname (Last Name)  Han
3. Date  16-April-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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Section 1. Identifying Information

1. Given Name (First Name)  Wuran
2. Surname (Last Name)      Wei
3. Date                     16-April-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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