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)  
   Takahiro

2. Surname (Last Name)  
   Higashibata

3. Date  
   27-March-2020

4. Are you the corresponding author?  
   ✔ Yes  
   No

5. Manuscript Title  
   Barriers to inpatient palliative care consultation among patients with newly diagnosed cancer after emergency admission

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

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   ✔ 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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Section 6. Disclosure Statement

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Dr. Higashibata has nothing to disclose.

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Royalties: Funds are coming in to you or your institution due to your
# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Section 1. Identifying Information

1. Given Name (First Name)  
   Takayuki  

2. Surname (Last Name)  
   Hisanaga  

3. Date  
   27-March-2020  

4. Are you the corresponding author?  
   Yes ☐  No ☑  
   Corresponding Author’s Name  
   Takahiro Higashibata  

5. Manuscript Title  
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Are there any relevant conflicts of interest?  
   Yes ☐  No ☑  

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Dr. Hisanaga has nothing to disclose.

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1. Given Name (First Name)  
Miki

2. Surname (Last Name)  
Kobayashi

3. Date  
27-March-2020

4. Are you the corresponding author?  
☐ Yes  ☑ No  
Corresponding Author’s Name  
Takahiro Higashibata

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Ms. Kobayashi has nothing to disclose.

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<tr>
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<th>2. Surname (Last Name)</th>
<th>3. Date</th>
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<tbody>
<tr>
<td>Shingo</td>
<td>Hagiwara</td>
<td>27-March-2020</td>
</tr>
</tbody>
</table>

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

Corresponding Author’s Name  
Takahiro Higashibata

5. Manuscript Title  
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**Section 1. Identifying Information**

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Miho

2. Surname (Last Name)  
Shimokawa

3. Date  
27-March-2020

4. Are you the corresponding author?  
☐ Yes  ☑ No  
Corresponding Author’s Name  
Takahiro Higashibata

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Dr. Shimokawa has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
Ritsuko

2. Surname (Last Name)  
Yabuki

3. Date  
27-March-2020

4. Are you the corresponding author?  
✔ No

Corresponding Author’s Name  
Takahiro Higashibata

5. Manuscript Title  
Barriers to inpatient palliative care consultation among patients with newly diagnosed cancer after emergency admission

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.)?

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Yes  ✔ No
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Dr. Yabuki has nothing to disclose.

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### Identifying Information

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<td>Shigeru</td>
<td>Atake</td>
<td>27-March-2020</td>
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<td>4. Are you the corresponding author?</td>
<td>Yes</td>
<td>No</td>
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<td>5. Manuscript Title</td>
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1. Given Name (First Name)  
Mototsugu

2. Surname (Last Name)  
Kohno

3. Date  
27-March-2020

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

Corresponding Author’s Name  
Takahiro Higashibata

5. Manuscript Title  
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Yasuo

2. Surname (Last Name)  
Shima

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Takahiro Higashibata

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