ICMJE Form for Disclosure of Potential Conflicts of Interest

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

1. **Identifying information.**

2. **The work under consideration for publication.**

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4. **Intellectual Property.**

   This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

5. **Relationships not covered above.**

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**Definitions.**

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Patricia

2. Surname (Last Name)  
   Gaona Luviano

3. Date  
   03-June-2020

4. Are you the corresponding author?  
   ✔ Yes  
   No

5. Manuscript Title  
   Epidemiology of ovarian cancer

6. Manuscript Identifying Number (if you know it)  
   CCO-2019-OC-04(CCO-20-34)

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**Section 2. The Work Under Consideration for Publication**

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Are there any relevant conflicts of interest?  
   ✔ Yes  
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**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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Dr. Gaona Luviano has nothing to disclose.

Evaluation and Feedback

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Lourdes Adriana

2. Surname (Last Name)  
   Medina Gaona

3. Date  
   07-June-2020

4. Are you the corresponding author?  
   Yes  ☑  No

5. Corresponding Author's Name  
   Patricia Gaona Luviano

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<td>07-June-2020</td>
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