ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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.

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# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Section 1. Identifying Information

1. Given Name (First Name)  
   Jiawei

2. Surname (Last Name)  
   Hong

3. Date  
   11-April-2020

4. Are you the corresponding author?  
   □ Yes  ✔ No  
   Corresponding Author’s Name  
   Shusen Zheng

5. Manuscript Title  
   Stereotactic body radiation therapy versus radiofrequency ablation in patients with small hepatocellular carcinoma: A systematic review and meta-analysis

6. Manuscript Identifying Number (if you know it)  
   HBSN-19-916

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Are there any relevant conflicts of interest?  
□ Yes  ✔ No

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□ Yes  ✔ 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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Hong
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Dr Hong has nothing to disclose.

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1. Given Name (First Name)  
   Cao

2. Surname (Last Name)  
   Cao

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   Corresponding Author's Name  
   Shusen Zheng

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Dr Cao has nothing to disclose.

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Yuanxing

2. Surname (Last Name)  
   Liu

3. Date  
   11-April-2020

4. Are you the corresponding author?  
   ☐ Yes  ☑ No  
   Corresponding Author's Name  
   Shusen Zheng

5. Manuscript Title  
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Dr Liu has nothing to disclosure.

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## Section 1. Identifying Information

1. Given Name (First Name) | Haiyang
2. Surname (Last Name) | Xie
3. Date | 11-April-2020
4. Are you the corresponding author? [ ] Yes [✓] No
   Corresponding Author's Name | Shusen Zheng

5. Manuscript Title
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Xie
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Dr Xie has nothing to disclose.

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1. Given Name (First Name)  
Jun

2. Surname (Last Name)  
Yu

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11-April-2020

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Corresponding Author’s Name  
Shusen Zheng

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Dr Yu has nothing to disclosure.

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

5. Relationships not covered above.

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Entity: government agency, foundation, commercial sponsor, academic institution, etc.

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

Zheng
1. Given Name (First Name)  2. Surname (Last Name)  3. Date
Shusen  Zheng  11-April-2020

4. Are you the corresponding author?  

Yes  No

5. Manuscript Title
Stereotactic body radiation therapy versus radiofrequency ablation in patients with small hepatocellular carcinoma: A systematic review and meta-analysis

6. Manuscript Identifying Number (if you know it)
HBSN-15-916

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Dr Zheng has nothing to disclose.

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