

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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#### 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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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Scott	2. Surname (Last Name) Kizy	3. Date 21-March-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Eric Jensen
5. Manuscript Title Systemic therapy without radiation may be appropriate as neoadjuvant therapy for localized pancreas cancer		
6. Manuscript Identifying Number (if you know it) HBSN-19-244		

### 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?  Yes  No

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Are there any relevant conflicts of interest?  Yes  No

### 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. Kizy has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Ariella	2. Surname (Last Name) Altman	3. Date 23-March-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Eric H Jensen
5. Manuscript Title Systemic therapy without radiation may be appropriate as neoadjuvant therapy for localized pancreas cancer		
6. Manuscript Identifying Number (if you know it) HBSN-19-244		

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

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Dr. Altman has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Keith

2. Surname (Last Name)  
Wirth

3. Date  
20-March-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Dr. Eric Jensen

5. Manuscript Title

Systemic therapy without radiation may be appropriate as neoadjuvant therapy for localized pancreas cancer

6. Manuscript Identifying Number (if you know it)

HBSN-19-244

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Dr. Wirth has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name)  
Schelomo

2. Surname (Last Name)  
Marmor

3. Date  
20-March-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Dr. Eric Jensen

5. Manuscript Title

Systemic therapy without radiation may be appropriate as neoadjuvant therapy for localized pancreas cancer

6. Manuscript Identifying Number (if you know it)

HBSN-19-244

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Dr. Marmor has nothing to disclose.

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1. Given Name (First Name) Jane Yuet Ching	2. Surname (Last Name) Hui	3. Date 20-March-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name
5. Manuscript Title Systemic therapy without radiation may be appropriate as neoadjuvant therapy for localized pancreas cancer		
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Dr. Hui has nothing to disclose.

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



## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Todd	2. Surname (Last Name) Tuttle	3. Date 20-March-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Eric Jensen
5. Manuscript Title Systemic therapy without radiation may be appropriate as neoadjuvant therapy for localized pancreas cancer		
6. Manuscript Identifying Number (if you know it) HBSN-19-244		

### 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?  Yes  No

### Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest?  Yes  No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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### Section 5. Relationships not covered above

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### Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Tuttle has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Emil	2. Surname (Last Name) Lou	3. Date 20-March-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Eric Jensen
5. Manuscript Title Systemic therapy without radiation may be appropriate as neoadjuvant therapy for localized pancreas cancer		
6. Manuscript Identifying Number (if you know it) HSBN-19-244		

### 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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Are there any relevant conflicts of interest?  Yes  No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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### Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Lou has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Khalid	2. Surname (Last Name) Amin	3. Date 20-March-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Eric Jensen
5. Manuscript Title Systemic therapy without radiation may be appropriate as neoadjuvant therapy for localized pancreas cancer		
6. Manuscript Identifying Number (if you know it) HBSN-19-244		

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

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Are there any relevant conflicts of interest?  Yes  No

### Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest?  Yes  No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Amin has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Jason	2. Surname (Last Name) Denbo	3. Date 27-March-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Eric Jensen
5. Manuscript Title Systemic therapy without radiation may be appropriate as neoadjuvant therapy for localized pancreas cancer		
6. Manuscript Identifying Number (if you know it) HBSN-19-244		

### 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?  Yes  No

### Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest?  Yes  No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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### Section 5. Relationships not covered above

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### Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Denbo has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Eric

2. Surname (Last Name)  
Jensen

3. Date  
24-March-2020

4. Are you the corresponding author?  Yes  No

5. Manuscript Title  
Systemic therapy without radiation may be appropriate as neoadjuvant therapy for localized pancreas cancer

6. Manuscript Identifying Number (if you know it)  
HBSN-19-244

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

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