

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)

Jieling

2. Surname (Last Name)

Zhou

3. Date

18-May-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Jiqiang Li

5. Manuscript Title

Combining Immunotherapy and Radiotherapy in lung Cancer: a 2 Promising Future?

6. Manuscript Identifying Number (if you know it)

JTD-2019-ITM-001-R1

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Dr. Zhou has nothing to disclose.

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Section 1. Identifying Information

| | | |
|--|---------------------------------|---|
| 1. Given Name (First Name) Qian | 2. Surname (Last Name) Huang | 3. Date 18-May-2020 |
| 4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Corresponding Author's Name Jiqiang Li |
| 5. Manuscript Title Combining Immunotherapy and Radiotherapy in lung Cancer: a 2 Promising Future? | | |
| 6. Manuscript Identifying Number (if you know it) JTD-2019-ITM-001-R1 | | |

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Jiqiang

2. Surname (Last Name)

Li

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18-May-2020

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