

#### **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.

## Identifying information.

## 2. The work under consideration for publication.

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

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

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## 4. Intellectual Property.

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

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earning royalties or not

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Dy



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Grace	2. Surname (Last Name) Dy	3. Date 12-May-2020
4. Are you the corresponding author?	✓ Yes No	
5. Manuscript Title First-line cytotoxic chemotherapy regin	nen for non-small cell lung cancer in the elderly pop	ulation: Plus ca change
6. Manuscript Identifying Number (if you kr TLCR-2020-15	now it)	
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Section 4. Intellectual Proper	rty Patents & Copyrights	
_	ned, pending or issued, broadly relevant to the work	? ☐ Yes ✓ No

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Section 5.		
Section 5.	Relationships not covered above	
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	nuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements nals may ask authors to disclose further information about reported relationships.	
Section 6.	Disclosure Statement	
Based on the aborbelow.	ve disclosures, this form will automatically generate a disclosure statement, which will appear in the box	
Dr. Dy has nothin	g to disclose.	

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Khalil 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi Maya	rst Name)	2. Surname (Last Name) Khalil	3. Date 12-May-2020
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Grace Dy
5. Manuscript Title First-line cytotox		nen for non-small cell lung	cancer in the elderly population: Plus ca change
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Did you or your institution <b>at any time</b> 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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Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No

Khalil 2



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Yau 1



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