

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

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Section 1. Identifying Information

1. Given Name (First Name) Francesca	2. Surname (Last Name) Bersani	3. Date 21-April-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Riccardo Taulli
5. Manuscript Title Future perspectives from lung cancer pre-clinical models: new treatments are coming?		
6. Manuscript Identifying Number (if you know it) TLCR-2019-CNSCLC-01(TLCR-20-189)		

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Dr. Bersani has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) DEBORAH	2. Surname (Last Name) MORENA	3. Date 20-April-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name RICCARDO TAULLI
5. Manuscript Title Future perspectives from lung cancer pre-clinical models: new treatments are coming?		
6. Manuscript Identifying Number (if you know it) TLCR-2019-CNSCLC-01(TLCR-20-189)		

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Dr. MORENA has nothing to disclose.

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1. Given Name (First Name) Francesca	2. Surname (Last Name) Picca	3. Date 23-April-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Riccardo Taulli
5. Manuscript Title Future perspectives from lung cancer pre-clinical models: new treatments are coming?		
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Dr. Picca has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) ALESSANDRO	2. Surname (Last Name) MOROTTI	3. Date 22-April-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Riccardo Taulli
5. Manuscript Title Future perspectives from lung cancer pre-clinical models: new treatments are coming?		
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Dr. MOROTTI has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Fabrizio	2. Surname (Last Name) Tabbo'	3. Date 23-April-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Riccardo Taulli
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Paolo	2. Surname (Last Name) Bironzo	3. Date 22-April-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Riccardo Taulli
5. Manuscript Title Future perspectives from lung cancer pre-clinical models: new treatments are coming?		
6. Manuscript Identifying Number (if you know it) TLCR-2019-CNSCLC-01(TLCR-20-189)		

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.)?

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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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Relationships not covered above

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Section 6.

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

Dr. Bironzo has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name) Luisella	2. Surname (Last Name) Righi	3. Date 22-April-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Taulli Riccardo
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Section 1. Identifying Information

1. Given Name (First Name)

Riccardo

2. Surname (Last Name)

Taulli

3. Date

20-April-2020

4. Are you the corresponding author?

☒ Yes ☐ No

5. Manuscript Title

Future perspectives from lung cancer pre-clinical models: new treatments are coming?

6. Manuscript Identifying Number (if you know it)

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