ICMJE DISCLOSURE FORM

Date:	September 19 th , 2022					
Your Name:	Axel Grothey	<u> </u>				
Manuscript 7	Title: <u>Pembrolizur</u>	nab in metastatic mismatch repair deficient colorectal cancer: the beginning				
of a journey into the land of immunotherapies for all cancers						
Manuscript i	number (if known):	CCO-22-89				
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In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are						

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The following questions apply to the author's relationships/activities/interests as they relate to the <u>current manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

		Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution)		
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	Time frame: past 36 months				
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3	Royalties or licenses	xNone			
4	Consulting fees	x None			

5	Payment or honoraria for lectures, presentations,	x None				
	speakers bureaus, manuscript writing or educational events					
6	Payment for expert testimony	x None				
7	Support for attending meetings and/or travel	x None				
8	Patents planned, issued or	x None				
	pending					
0	Doutisination on a Data	v. Name				
9	Participation on a Data Safety Monitoring Board or	xNone				
	Advisory Board					
10	Leadership or fiduciary role	x None				
	in other board, society,					
	committee or advocacy group, paid or unpaid					
11	Stock or stock options	x None				
12	Receipt of equipment, materials, drugs, medical writing, gifts or other	x None				
	services					
13	Other financial or non- financial interests	x None				
Please summarize the above conflict of interest in the following box:						
	None.					

Please place an "X" next to the following statement to indicate your agreement:

__x__ I certify that I have answered every question and have not altered the wording of any of the questions on this form.