

## ICMJE DISCLOSURE FORM

Date: 2022/12/28

Your Name: Xin Qi

Manuscript Title: Treatment-related neuroendocrine prostate cancer managed with partial stereotactic ablative radiotherapy (P-SABR) for long-term survival: a case series

Manuscript number (if known): \_\_\_\_\_

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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<b>Time frame: Since the initial planning of the work</b>			
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3	Royalties or licenses	<u>  X  </u> None	
4	Consulting fees	<u>  X  </u> None	

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13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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## ICMJE DISCLOSURE FORM

Date: 2022/12/28

Your Name: Zhuo-Fei Zhang

Manuscript Title: Treatment-related neuroendocrine prostate cancer managed with partial stereotactic ablative radiotherapy (P-SABR) for long-term survival: a case series

Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: 2022/12/28

Your Name: Xian-Shu Gao

Manuscript Title: Treatment-related neuroendocrine prostate cancer managed with partial stereotactic ablative radiotherapy (P-SABR) for long-term survival: a case series

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## ICMJE DISCLOSURE FORM

Date: 2022/12/28

Your Name: Shang-Bin Qin

Manuscript Title: Treatment-related neuroendocrine prostate cancer managed with partial stereotactic ablative radiotherapy (P-SABR) for long-term survival: a case series

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## ICMJE DISCLOSURE FORM

Date: 2022/12/28

Your Name: Yun Bai

Manuscript Title: Treatment-related neuroendocrine prostate cancer managed with partial stereotactic ablative radiotherapy (P-SABR) for long-term survival: a case series

Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: 2022/12/28

Your Name: Wei Yu

Manuscript Title: Treatment-related neuroendocrine prostate cancer managed with partial stereotactic ablative radiotherapy (P-SABR) for long-term survival: a case series

Manuscript number (if known): \_\_\_\_\_

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Date: 2022/12/28

Your Name: Qun He

Manuscript Title: Treatment-related neuroendocrine prostate cancer managed with partial stereotactic ablative radiotherapy (P-SABR) for long-term survival: a case series

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## ICMJE DISCLOSURE FORM

Date: 2022/12/28

Your Name: Yu Fan

Manuscript Title: Treatment-related neuroendocrine prostate cancer managed with partial stereotactic ablative radiotherapy (P-SABR) for long-term survival: a case series

Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: 2022/12/28

Your Name: Jian-Hua Zhang

Manuscript Title: Treatment-related neuroendocrine prostate cancer managed with partial stereotactic ablative radiotherapy (P-SABR) for long-term survival: a case series

Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: 2022/12/28

Your Name: Yuan Jiang

Manuscript Title: Treatment-related neuroendocrine prostate cancer managed with partial stereotactic ablative radiotherapy (P-SABR) for long-term survival: a case series

Manuscript number (if known): \_\_\_\_\_

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Date: 2022/12/28

Your Name: Zhi-Song He

Manuscript Title: Treatment-related neuroendocrine prostate cancer managed with partial stereotactic ablative radiotherapy (P-SABR) for long-term survival: a case series

Manuscript number (if known): \_\_\_\_\_

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2	Grants or contracts from any entity (if not indicated in item #1 above).	<u>  X  </u> None	
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4	Consulting fees	<u>  X  </u> None	

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10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input checked="" type="checkbox"/> None	
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Please summarize the above conflict of interest in the following box:

None

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

## ICMJE DISCLOSURE FORM

Date: 2022/12/28

Your Name: Hong-Zhen Li

Manuscript Title: Treatment-related neuroendocrine prostate cancer managed with partial stereotactic ablative radiotherapy (P-SABR) for long-term survival: a case series

Manuscript number (if known): \_\_\_\_\_

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