## ICMJE DISCLOSURE FORM

Date:July 27, 2021
Your Name: Badrinath Konety
Manuscript Title: Preface "Current and future topics in prostate cancer
Manuscript number (if known): TAU-2020-PC-12(TAU-2021-04)

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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)	Specifications/Comments (e.g., if payments were made to you or to your institution)
Time frame: Since the initial planning of the work			planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  No time limit for this item.	xNone	
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2	Grants or contracts from any entity (if not indicated in item #1 above).	x_None	
3	Royalties or licenses	x _None	
4	Consulting fees	x_None	
5		xNone	

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

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.

## ICMJE DISCLOSURE FORM

Date:July 27, 2021			
Your Name:Daniel W. Lin			
Manuscript Title: Preface "Current and future topics in prostate cancer			
Manuscript number (if known): TAU-2020-PC-12(TAU-2021-04)			

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