Date:	2022/5/30	
Your Name:_	Zhuming Lu	
patients afte	r first- or second-line tyro	he treatment of EGFR-mutant T790M-negative advanced lung adenocarcinoma sine kinase inhibitor treatment failure: a retrospective study
Manuscript n	iumber (if known):	
In the interes	st of transparency, we asl	you to disclose all relationships/activities/interests listed below that are

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		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)
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.	Time frame: Since the initialXNone	planning of the work
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events	V 1	
6	Payment for expert testimony	XNone	
	testimony		
7	Support for attending	X None	
<b>'</b>	meetings and/or travel		
	,		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid Stock or stock options	X None	
11	Stock of Stock options		
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

None			

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

Date:	2022/5/30	
Your Name: Mi	ing Ye	
<b>Manuscript Title: P</b>	Pembrolizumab for the treat	nent of EGFR-mutant T790M-negative advanced lung adenocarcinoma
patients after first-	or second-line tyrosine kina	se inhibitor treatment failure: a retrospective study
Manuscript numbe	er (if known):	

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		Time frame: past	36 months
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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events	V 1	
6	Payment for expert testimony	XNone	
	testimony		
7	Support for attending	X None	
<b>'</b>	meetings and/or travel		
	,		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid Stock or stock options	X None	
11	Stock of Stock options		
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

None			

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

Date:	_2022/5/30	
Your Name: Tao	Sun	
<b>Manuscript Title: Per</b>	mbrolizumab for the treatment	of EGFR-mutant T790M-negative advanced lung adenocarcinoma
patients after first- o	r second-line tyrosine kinase in	hibitor treatment failure: a retrospective study
Manuscript number (	(if known):	

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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events	V 1	
6	Payment for expert testimony	XNone	
	testimony		
7	Support for attending	X None	
<b>'</b>	meetings and/or travel		
	,		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid Stock or stock options	X None	
11	Stock of Stock options		
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

None			

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

Date:	2022/5/30	
Your Name:_	Suoyun Wu	
•		he treatment of EGFR-mutant T790M-negative advanced lung adenocarcinoma sine kinase inhibitor treatment failure: a retrospective study
Manuscript n	umber (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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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events	V 1	
6	Payment for expert testimony	XNone	
	testimony		
7	Support for attending	X None	
<b>'</b>	meetings and/or travel		
	,		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid Stock or stock options	X None	
11	Stock of Stock options		
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

None			

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

Date:	2022/5/30	
Your Name:	Zhichao Lin	
patients after f	first- or second-line tyro	he treatment of EGFR-mutant T790M-negative advanced lung adenocarcinoma sine kinase inhibitor treatment failure: a retrospective study
	• • • • • • • • • • • • • • • • • • • •	you to disclose all relationships/activities/interests listed below that are ript. "Related" means any relation with for-profit or not-for-profit third

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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events	V 1	
6	Payment for expert testimony	XNone	
	testimony		
7	Support for attending	X None	
<b>'</b>	meetings and/or travel		
	,		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid Stock or stock options	X None	
11	Stock of Stock options		
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

None			

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

Date:	2022/5/30	
Your Name:	_Xin Zhang	
Manuscript Tit	tle: Pembrolizumab for	the treatment of EGFR-mutant T790M-negative advanced lung adenocarcinoma osine kinase inhibitor treatment failure: a retrospective study
Manuscript nu	ımber (if known):	· · ·
lo 46 a intanas	-f +	

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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		Time frame: past	36 months
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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events	V 1	
6	Payment for expert testimony	XNone	
	testimony		
7	Support for attending	X None	
<b>'</b>	meetings and/or travel		
	,		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid Stock or stock options	X None	
11	Stock of Stock options		
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

None			

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

Date:	2022/5/30	
Your Name:	Dongping Rao	
Manuscript Ti	itle: Pembrolizumab fo	or the treatment of EGFR-mutant T790M-negative advanced lung adenocarcinoma
patients after	first- or second-line ty	rosine kinase inhibitor treatment failure: a retrospective study
Manuscript no	umber (if known):	

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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events	V 1	
6	Payment for expert testimony	XNone	
	testimony		
7	Support for attending	X None	
<b>'</b>	meetings and/or travel		
	,		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid Stock or stock options	X None	
11	Stock of Stock options		
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

None			

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

Date:	2022/5/30	
Your Name:	Dongxi Zhang	
Manuscript <sup>1</sup>	Title: Pembrolizumab for	the treatment of EGFR-mutant T790M-negative advanced lung adenocarcinoma
patients afte	er first- or second-line ty	osine kinase inhibitor treatment failure: a retrospective study
Manuscript i	number (if known):	

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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events	V 1	
6	Payment for expert testimony	XNone	
	testimony		
7	Support for attending	X None	
<b>'</b>	meetings and/or travel		
	,		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid Stock or stock options	X None	
11	Stock of Stock options		
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

None			

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

Date:	2022/5/30	
Your Name:_	Yongwen Ke	
Manuscript Ti	itle: Pembrolizumab for t	ne treatment of EGFR-mutant T790M-negative advanced lung adenocarcinoma
patients after	r first- or second-line tyro	sine kinase inhibitor treatment failure: a retrospective study
Manuscript n	umber (if known):	
In the interes	t of transparency, we ask	you to disclose all relationships/activities/interests listed below that are

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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events	V 1	
6	Payment for expert testimony	XNone	
	testimony		
7	Support for attending	X None	
<b>'</b>	meetings and/or travel		
	,		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid Stock or stock options	X None	
11	Stock of Stock options		
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

None			

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

Date:	2022/5/30	
Your Name:	Zhuowen Chen _	
•		for the treatment of EGFR-mutant T790M-negative advanced lung adenocarcinoma tyrosine kinase inhibitor treatment failure: a retrospective study
•		

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Time frame: past 36 months										
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone								
3	Royalties or licenses	XNone								
4	Consulting fees	XNone								

5	Payment or honoraria for lectures, presentations,	XNone	
	speakers bureaus,		
	manuscript writing or		
	educational events	V 1	
6	Payment for expert testimony	XNone	
	testimony		
7	Support for attending	X None	
<b>'</b>	meetings and/or travel		
	meetings and, or traver		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid Stock or stock options	X None	
11	Stock of Stock options		
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non- financial interests	XNone	

None			

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