

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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#### 1. Identifying information.

#### 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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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Samantha

2. Surname (Last Name)  
Sigurdson

3. Date  
14-January-2019

4. Are you the corresponding author? ☒ Yes ☐ No

5. Manuscript Title  
Case presentation and recommendations from the April 2018 ITMIG tumor board: an international multidisciplinary team

6. Manuscript Identifying Number (if you know it)  
MED-18-185

### Section 2. The Work Under Consideration for Publication

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☐ Yes ☒ No

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Dr. Sigurdson has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name)  
Anja

2. Surname (Last Name)  
Roden

3. Date  
14-January-2019

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name  
Samantha Sigurdson

5. Manuscript Title

Case presentation and recommendations from the April 2018 ITMIG tumor board: an international multidisciplinary team

6. Manuscript Identifying Number (if you know it)

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Dr. Roden has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name) Edith	2. Surname (Last Name) Marom	3. Date 14-January-2019
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Sigurdson, Samantha
5. Manuscript Title Case presentation and recommendations from the April 2018 ITMIG tumor board: an international multidisciplinary team		
6. Manuscript Identifying Number (if you know it) MED-18-185		

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If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Bristol-Meyers Squibb	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	honorarium for a lecture
Boehringer Ingelheim	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	honorarium for a lecture
Merck Sharp and Dohme	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	honorarium for a lecture

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Dr. Marom reports other from Bristol-Meyers Squibb, other from Boehringer Ingelheim, other from Merck Sharp and Dohme; outside the submitted work.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Frank

2. Surname (Last Name)  
Detterbeck

3. Date  
14-January-2019

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name  
Samantha Sigurdson

5. Manuscript Title

Case presentation and recommendations from the April 2018 ITMIG tumor board: an international multidisciplinary team

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Dr. Detterbeck has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name)  
Conrad

2. Surname (Last Name)  
Falkson

3. Date  
14-January-2019

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name  
Samantha Sigurdson

5. Manuscript Title  
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