

ICMJE DISCLOSURE FORM

Date: May 11, 2023

Your Name: Soo Jin Seung

Manuscript Title: Real-world treatment patterns and survival outcomes for treated biliary tract cancer patients using administrative databases in Ontario

Manuscript number (if known): JGO-23-155

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.

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

The author's relationships/activities/interests should be defined broadly. 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			
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.	AstraZeneca Canada	Payment to Sunnybrook Research Institute
Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations, speakers bureaus,	None	

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

Please summarize the above conflict of interest in the following box:

The author's institution received funding that supported the present manuscript.

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: May 11, 2023

Your Name: Hasnain Saherawala

Manuscript Title: Real-world treatment patterns and survival outcomes for treated biliary tract cancer patients using administrative databases in Ontario

Manuscript number (if known): JGO-23-155

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ICMJE DISCLOSURE FORM

Date: May 11, 2023
 Your Name: Iqra Syed
 Manuscript Title: Real-world treatment patterns and survival outcomes for treated biliary tract cancer patients using administrative databases in Ontario
 Manuscript number (if known): JGO-23-155

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5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	___ None	
6	Payment for expert testimony	___ None	
7	Support for attending meetings and/or travel	___ None	
8	Patents planned, issued or pending	___ None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	___ None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	___ None	
11	Stock or stock options	AstraZeneca	paid as part of employment
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	___ None	
13	Other financial or non-financial interests	AstraZeneca	full time employee of AstraZeneca Pharmaceuticals LP

Please summarize the above conflict of interest in the following box:

Employee of AstraZeneca.

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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: May 11, 2023
 Your Name: Cal Shephard
 Manuscript Title: Real-world treatment patterns and survival outcomes for treated biliary tract cancer patients using administrative databases in Ontario
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3	Royalties or licenses	None	
4	Consulting fees	None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	___ None	
6	Payment for expert testimony	___ None	
7	Support for attending meetings and/or travel	___ None	
8	Patents planned, issued or pending	___ None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	___ None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	___ None	
11	Stock or stock options	AstraZeneca	paid as part of employment
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	___ None	
13	Other financial or non-financial interests	AstraZeneca	full time employee of AstraZeneca Pharmaceuticals LP

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ICMJE DISCLOSURE FORM

Date: May 11, 2023
 Your Name: Derek Clouthier
 Manuscript Title: Real-world treatment patterns and survival outcomes for treated biliary tract cancer patients using administrative databases in Ontario
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4	Consulting fees	None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	___ None	
6	Payment for expert testimony	___ None	
7	Support for attending meetings and/or travel	___ None	
8	Patents planned, issued or pending	___ None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	___ None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	___ None	
11	Stock or stock options	AstraZeneca	paid as part of employment
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	___ None	
13	Other financial or non-financial interests	AstraZeneca	full time employee of AstraZeneca Pharmaceuticals LP

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ICMJE DISCLOSURE FORM

Date: May 12, 2023

Your Name: Eric Chen

Manuscript Title: Real-world treatment patterns and survival outcomes for treated biliary tract cancer patients using administrative databases in Ontario

Manuscript number (if known): JGO-23-155

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Time frame: past 36 months			
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3	Royalties or licenses	None	
4	Consulting fees	None	

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

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Received honoraria from AstraZeneca and participated in clinical trials sponsored by AstraZeneca

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