

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

1. Identifying information.

2. The work under consideration for publication.

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3. Relevant financial activities outside the submitted work.

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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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Royalties: Funds are coming in to you or your institution due to your patent



Section 1.	Identifying Inforn	nation		
1. Given Name (Fi Lucyna	rst Name)	2. Surname (Last Name Kepka)	3. Date 20-May-2020
4. Are you the cor	responding author?	✓ Yes No		
	r brain metastases fron ntifying Number (if you k		in distinct clinical indications	and scenarios
Section 2.	The Work Under C	onsideration for Pu	olication	
any aspect of the s statistical analysis,	submitted work (including	g but not limited to grants	, data monitoring board, study d	ommercial, private foundation, etc.) for esign, manuscript preparation,

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Are there any relevant conflicts of interest?		Yes	\checkmark	No
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Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?	Yes	V N	١o
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Section 6. Disclosure Statement

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Dr. Kepka has nothing to disclose.

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Section 1.	Identifying Infor	mation		
1. Given Name (Fi JOANNA	rst Name)	2. Surname (Last Name) SOCHA	3. Date 27-May-	2020
4. Are you the cor	responding author?	0 Yes 1 No	Corresponding Author's Name LUCYNA KĘPKA	
5. Manuscript Title Radiotherapy fo		m small-cell lung cancer in	distinct clinical indications and scena	rios

6. Manuscript Identifying Number (if you know it)

JTD-2019-RBMLC-03

Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest?

2 No

Yes

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2 No

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1. Given Name (First Name) Beata	2. Surname (Last Name) Sas-Korczynska	3. Date 27-May-	2020
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Name Lucyna Kepka	
5. Manuscript Title Radiotherapy for brain metastases fror	n small-cell lung cancer ir	distinct clinical indications and scena	arios
6. Manuscript Identifying Number (if you k JTD-2019-RBMLC-03	now it)		
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