

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

José Manuel

2. Surname (Last Name)

González de Aledo Castillo

3. Date

02-October-2020

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Joan Antón Puig-Butillé

5. Manuscript Title

Molecular characterization of advanced Non-Small Cell Lung Cancer patients by cfDNA analysis: experience from routine laboratory practice

6. Manuscript Identifying Number (if you know it)

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Dr. González de Aledo Castillo has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Ainara

2. Surname (Last Name)

Arcocha

3. Date

21-October-2020

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

5. Manuscript Title

Molecular characterization of advanced Non-Small Cell Lung Cancer patients by cfDNA analysis: experience from routine laboratory practice

6. Manuscript Identifying Number (if you know it)

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Dr. Arcocha has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Iván

2. Surname (Last Name)

Victoria

3. Date

13-October-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Joan Antón Puig-Butillé

5. Manuscript Title

Molecular characterization of advanced Non-Small Cell Lung Cancer patients by cfDNA analysis: experience from routine laboratory practice

6. Manuscript Identifying Number (if you know it)

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Dr. Victoria has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Ana Isabel

2. Surname (Last Name)
Martínez-Puchol

3. Date
06-October-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Joan Antón Puig-Butillé

5. Manuscript Title
Molecular characterization of advanced Non-Small Cell Lung Cancer patients by cfDNA analysis: experience from routine laboratory practice

6. Manuscript Identifying Number (if you know it)

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Dr. Martínez-Puchol has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Cristina	2. Surname (Last Name) Sánchez Cárdenas	3. Date 22-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Joan Anton Puig-Butille
5. Manuscript Title Molecular characterization of advanced Non-Small Cell Lung Cancer patients by cfDNA analysis: experience from routine laboratory practice		
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Pedro

2. Surname (Last Name)
Jares

3. Date
10-October-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Joan Antón Puig-Butillé

5. Manuscript Title
Molecular characterization of advanced Non-Small Cell Lung Cancer patients by cfDNA analysis: experience from routine laboratory practice

6. Manuscript Identifying Number (if you know it)

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? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

- Yes, the following relationships/conditions/circumstances are present (explain below):
- No other relationships/conditions/circumstances that present a potential conflict of interest

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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Jares has nothing to disclose.

Evaluation and Feedback

Please visit <http://www.icmje.org/cgi-bin/feedback> to provide feedback on your experience with completing this form.

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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Non-Financial Support: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Gabriel Felipe

2. Surname (Last Name)

Rodríguez

3. Date

07-October-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Joan Antón Puig-Butillé

5. Manuscript Title

Molecular characterization of advanced Non-Small Cell Lung Cancer patients by cfDNA analysis: experience from routine laboratory practice

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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

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Dr. Rodríguez has nothing to disclose.

Evaluation and Feedback

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Nuria	2. Surname (Last Name) Viñolas	3. Date 15-October-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Joan Antón Puig-Butillé
5. Manuscript Title Molecular characterization of advanced Non-Small Cell Lung Cancer patients by cfDNA analysis: experience from routine laboratory practice		
6. Manuscript Identifying Number (if you know it)		

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? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Roche	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	advisory board
BMS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	advisory board
Pfizer	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Boeringher ingelheim	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	advisory board
Lilly	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	advisory board
Astra zeneca	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	advisory board

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 4. Intellectual Property -- Patents & Copyrights

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

Section 5. Relationships not covered above

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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Viñolas reports personal fees from Roche, other from BMS, personal fees from Pfizer, other from Boeringher ingelheim, personal fees and other from Lilly, other from Astra zeneca, outside the submitted work; .

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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4. Intellectual Property.

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Roxana

2. Surname (Last Name)

Reyes

3. Date

19-October-2020

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

Joan Antón Puig-Butillé

5. Manuscript Title

Molecular characterization of advanced Non-Small Cell Lung Cancer patients by cfDNA analysis: experience from routine laboratory practice

6. Manuscript Identifying Number (if you know it)

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? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Reyes has nothing to disclose.

Evaluation and Feedback

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Noemí

2. Surname (Last Name) Reguart

3. Date 10-October-2020

4. Are you the corresponding author? Yes No

Corresponding Author's Name Joan Antón Puig-Butillé

5. Manuscript Title
Molecular characterization of advanced Non-Small Cell Lung Cancer patients by cfDNA analysis: experience from routine laboratory practice

6. Manuscript Identifying Number (if you know it)

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? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
MSD	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
AMGEM	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
TAKEDA	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
ASTRAZENECA	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
NOVARTIS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
ABBVIE	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
PFIZER	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
GUARDANT HEALTH	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

ICMJE Form for Disclosure of Potential Conflicts of Interest

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Boehringer Ingelheim	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
ROCHE	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
BMS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Section 4. Intellectual Property -- Patents & Copyrights

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

Section 5. Relationships not covered above

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Dr. Reguart reports personal fees from MSD, personal fees from AMGEN, personal fees from TAKEDA, personal fees from ASTRAZENECA, personal fees from NOVARTIS, personal fees from ABBVIE, personal fees from PFIZER, personal fees from GUARDANT HEALTH, personal fees from Boehringer Ingelheim, personal fees from ROCHE, personal fees from BMS, outside the submitted work; .

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Licensed: The patent has been licensed to an entity, whether earning royalties or not

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Joan Antón

2. Surname (Last Name)
Puig-Butillé

3. Date
02-October-2020

4. Are you the corresponding author? Yes No

5. Manuscript Title
Molecular characterization of advanced Non-Small Cell Lung Cancer patients by cfDNA analysis: experience from routine laboratory practice

6. Manuscript Identifying Number (if you know it)

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.)?

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Dr. Puig-Butillé has nothing to disclose.

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