

ICMJE DISCLOSURE FORM

Date: 17/8/2022
 Your Name: Yanfa SUN
 Manuscript Title: The quality of systematic reviews on the treatment of Stage I Non-Small Cell Lung Cancer for individualized decision-making: Improved but further refinements are needed
 Manuscript number (if known): JTD-22-1128

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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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			
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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, 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	
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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:

I have no conflicts of interest to declare.

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

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: 18/8/2022
 Your Name: Qianling Shi
 Manuscript Title: The quality of systematic reviews on the treatment of Stage I Non-Small Cell Lung Cancer for individualized decision-making: Improved but further refinements are needed
 Manuscript number (if known): JTD-22-1128

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ICMJE DISCLOSURE FORM

Date: 18/8/2022

Your Name: Anya Shi

Manuscript Title: The quality of systematic reviews on the treatment of Stage I Non-Small Cell Lung Cancer for individualized decision-making: Improved but further refinements are needed

Manuscript number (if known): JTD-22-1128

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ICMJE DISCLOSURE FORM

Date: 18/8/2022
 Your Name: Yaolong Chen
 Manuscript Title: The quality of systematic reviews on the treatment of Stage I Non-Small Cell Lung Cancer for individualized decision-making: Improved but further refinements are needed
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