

ICMJE DISCLOSURE FORM

Date: 2024/05/31

Your Name: Yizong Ding

Manuscript Title: **Preliminary experience of surgery after neoadjuvant immunotherapy combined with chemotherapy for stage-IIIB non-small cell lung cancer**

Manuscript number (if known): _____

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.	<u>__X__</u> None	
Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<u>__X__</u> None	
3	Royalties or licenses	<u>__X__</u> None	
4	Consulting fees	<u>__X__</u> None	

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

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

None

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: 2024/05/31

Your Name: Xiaojing Zhao

Manuscript Title: **Preliminary experience of surgery after neoadjuvant immunotherapy combined with chemotherapy for stage-IIIb non-small cell lung cancer**

Manuscript number (if known): _____

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4	Consulting fees	<u> X </u> None	

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ICMJE DISCLOSURE FORM

Date: Jan 12, 2024

Your Name: Petros Christopoulos

Title: Preliminary experience of surgery after neoadjuvant immunotherapy combined with chemotherapy for stage-IIIB non-small cell lung cancer

Manuscript number (if known): _____

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Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	Roche	research grant (to institution)
		Amgen	research grant (to institution)
		Boehringer Ingelheim	research grant (to institution)
		Takeda	research grant (to institution)
		Merck	research grant (to institution)
		AstraZeneca	research grant (to institution)
		Novartis	research grant (to institution)
3	Royalties or licenses	<input checked="" type="checkbox"/> None	
5	Payment or honoraria for lectures, presentations,	Roche	speaker's honoraria to myself
		Takeda	speaker's honoraria to myself

	speakers bureaus, manuscript writing or educational events	Gilead	speaker's honoraria to myself
		AstraZeneca	speaker's honoraria to myself
		Thermo Fisher	speaker's honoraria to myself
		Janssen	speaker's honoraria to myself
		Pfizer	speaker's honoraria to myself
		Novartis	speaker's honoraria to myself
6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	AstraZeneca	to myself
		Pfizer	to myself
		Janssen	to myself
		Gilead	to myself
		Daiichi Sankyo	to myself
		Takeda	to myself
		Novartis	to myself
		Eli Lilly	to myself
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	Pfizer	advisory board
		Chugai	advisory board
		Boehringer Ingelheim	advisory board
		Takeda	advisory board
		Novartis	advisory board
		AstraZeneca	advisory board
		MSD	advisory board
		Roche	advisory board
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input checked="" type="checkbox"/> None	
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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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

Petros Christopoulos has received research funding from AstraZeneca, Amgen, Boehringer Ingelheim, Merck, Novartis, Roche, and Takeda, speaker's honoraria from AstraZeneca, Gilead, Janssen, Novartis, Roche, Pfizer, Thermo Fisher, Takeda, support for attending meetings from AstraZeneca, Eli Lilly, Daiichi Sankyo, Janssen, Gilead, Novartis, Pfizer, Takeda, and personal fees for participating to advisory boards from AstraZeneca, Boehringer Ingelheim, Chugai, Pfizer, Novartis, MSD, Takeda and Roche, all outside the submitted work.

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: 5/28/24

Your Name: Travis C Geraci

Manuscript Title: Preliminary experience of surgery after neoadjuvant immunotherapy combined with chemotherapy for stage-IIIB non-small cell lung cancer

Manuscript number (if known):

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13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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

I have no conflicts of interest or disclosures.

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

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Date: 2024/05/31

Your Name: Yujie Fu

Manuscript Title: **Preliminary experience of surgery after neoadjuvant immunotherapy combined with chemotherapy for stage-IIIb non-small cell lung cancer**

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