

ICMJE DISCLOSURE FORM

Date: 2021-01-17

Your Name: Wei Li

Manuscript Title: **Development and Validation of a Prognostic Predictive Model of Pulmonary Spindle Cell Carcinoma from the Surveillance, Epidemiology and End Results Database**

Manuscript number (if known): **TCR-22-427**

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**.

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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)
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Time frame: past 36 months			
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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:

Wei Li has nothing to disclose.

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: 2021-01-17
 Your Name: Minghang Zhang
 Manuscript Title: Development and Validation of a Prognostic Predictive Model of Pulmonary Spindle Cell Carcinoma from the Surveillance, Epidemiology and End Results Database
 Manuscript number (if known): TCR-22-427

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

Minghang Zhang has nothing to disclose.

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: 2021-01-17

Your Name: Siyun Fu

Manuscript Title: Development and Validation of a Prognostic Predictive Model of Pulmonary Spindle Cell Carcinoma from the Surveillance, Epidemiology and End Results Database

Manuscript number (if known): TCR-22-427

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

Siyun Fu has nothing to disclose.

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: 2021-01-17

Your Name: Xuefeng Hao

Manuscript Title: Development and Validation of a Prognostic Predictive Model of Pulmonary Spindle Cell Carcinoma from the Surveillance, Epidemiology and End Results Database

Manuscript number (if known): TCR-22-427

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Xuefeng Hao has nothing to disclose.

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

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ICMJE DISCLOSURE FORM

Date: 2021-01-17

Your Name: Liwei Song

Manuscript Title: Development and Validation of a Prognostic Predictive Model of Pulmonary Spindle Cell Carcinoma from the Surveillance, Epidemiology and End Results Database

Manuscript number (if known): TCR-22-427

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Liwei Song has nothing to disclose.

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ICMJE DISCLOSURE FORM

Date: 2021-01-17

Your Name: Jinghui Wang

Manuscript Title: Development and Validation of a Prognostic Predictive Model of Pulmonary Spindle Cell Carcinoma from the Surveillance, Epidemiology and End Results Database

Manuscript number (if known): TCR-22-427

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ICMJE DISCLOSURE FORM

Date: 2021-01-17

Your Name: Bin Liu

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ICMJE DISCLOSURE FORM

Date: 2021-01-17

Your Name: Shaofa Xu

Manuscript Title: Development and Validation of a Prognostic Predictive Model of Pulmonary Spindle Cell Carcinoma from the Surveillance, Epidemiology and End Results Database

Manuscript number (if known): TCR-22-427

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