Date: 31.3.2022	
Your Name: Ma	rtin Svaton
Manuscript Title:	Comedication with corticosteroids and nonsteroidal antiphlogistics does not affect PD-L1
expression in non-sr	mall cell lung cancer
Manuscript number	(if known): TCR-22-260-CL

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 <u>current manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. 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.

		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.	University hospital in pilsen	Academic grant
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	University hospital in pilsen	Academic grant
3	Royalties or licenses	XNone	

4	Consulting fees	Farmaceutic companies	Astra Zeneca, Roche, MSD, BMS, Takeda, Novartis
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	Farmaceutic companies	As Point 4
6	Payment for expert testimony	XNone	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	_XNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	Farmaceutic companies	As Point 4
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	XNone	
13	Other financial or non- financial interests	XNone	

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

The author recieved honoraria by Astra Zeneca, Roche, MSD, BMS, Takeda, Novartis (consulting fees, lectures, Advisory Boards) and also is supported by academic institutional grant.

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.

ate: 31.3.2022	
our Name: MARI	E DRÖSSCEROVA
lanuscript Title:	Comedication with corticosteroids and nonsteroidal antiphlogistics does not affect PD-L1
pression in non-sm	all cell lung cancer
lanuscript number (i	f known): TCR-22-260-CL

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 <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. 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.

		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 initia	al 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.	X_None	
		Time frame: pas	t 36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for lectures, presentations, speakers bureaus,	XNone	
	manuscript writing or educational events		
6	Payment for expert testimony	XNone	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	_XNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	Stock or stock options	XNone	*******************
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	XNone	
13	Other financial or non- financial interests	X_None	

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

Twishun

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.

	Ondřej Fischer	Comedication with corticosteroids and nonsteroidal antiphlogistics does not affect PD-L1	expression in non-small cell lung cancer	Manuscript number (if known): TCR-22-260-CL
Date: 04.04.2022	Your Name:	Manuscript Title:	expression in non-s	Manuscript number

parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment 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 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.

—	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.	all entities with you have this nship or indicate add rows as all ame: Since the initial Time frame: past 3	Specifications/Comments (e.g., if payments were made to you or to your institution) Janning of the work Somethia
7	Grants or contracts from any entity (if not indicated in item #1 above).	None	And the second of the second o
m	Royalties or licenses	None	
4	Consulting fees	None	

n	Payment or honoraria for lectures, presentations.	None	
	speakers bureaus,		
	manuscript writing or educational events		
9	Payment for expert testimony	None	
_	Support for attending meetings and/or travel	None	
∞	Patents planned, issued or pending	None	
6	Participation on a Data Safety Monitoring Board or	None	
	Advisory Board		
10	Leadership or fiduciary role in other board, society, committee or advocacy	None	
1	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	

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XX I certify that I have answered every question and have not altered the wording of any of the questions on this form.

William Carana Pischer

Date: <u>31.3.2022</u>				
Your Name: Miloslav Marel, Prof, M.D., PhD				
Manuscript Title: Comedication with corticosteroids and nonsteroidal antiphlogistics does not affect PD-L1				
expression in non-small cell lung cancer				
Manuscript number (if known):TCR-22-260-CL				

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 <u>current manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. 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.

		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)
_	All Control	Time frame: Since the initial	planning of the work
1	All support for the present	XNone	
	manuscript (e.g., funding, provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	XNone	
	any entity(if not indicated in		
	item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for lectures, presentations,	XNone		
	speakers bureaus,			
	manuscript writing or			
_	educational events			
6	Payment for expert	XNone		
	testimony			
-	<u> </u>	V N		
7	Support for attending	XNone		
	meetings and/or travel			
8	Patents planned, issued or	_XNone		
	pending			
0	Posticipation on a Data	V. News		
9	Participation on a Data Safety Monitoring Board or	XNone		
	Advisory Board			
10	Leadership or fiduciary role	X None		
10	in other board, society, committee or advocacy	XNone		
	group, paid or unpaid			
11	Stock or stock options	XNone		
12	Receipt of equipment,	XNone		
	materials, drugs, medical			
	writing, gifts or other			
	services			
13	Other financial or non- financial interests	XNone		
Pام	ase summarize the above o	onflict of interest in the fol	lowing hox:	
	Please summarize the above conflict of interest in the following box:			
	I have no conflicts of interest to declare.			

_X__I certify that I have answered every question and have not altered the wording of any of the questions on this form.

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

Date: 31.3.2022		
Your Name: Michal I	Hrnčiarik	Speakers bareaus
Manuscript Title:	Comedication with corticosteroids and nonsteroidal ar	ntiphlogistics does not affect PD-L1
expression in non-sm		
Manuscript number (if known): TCR-22-260-CL	Association of the state of the

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 <u>current manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. 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.

		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 initia	al 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.	XNone	I of the management of the saling of the sal
		Time frame: pas	t 36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	X_None	
4	Consulting fees	XNone	mot

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lectures, prese	Payment or honoraria for lectures, presentations,	XNone	
speakers bure manuscript wr educational ev	iting or		
Payment for e testimony	xpert	XNone	13-005-35703T (Inwest Att) author
Support for at meetings and/		XNone	
Patents planne pending	ed, issued or	_XNone	
Participation of Safety Monito Advisory Board	ring Board or	XNone	THROUGHS FROMUS SOLOT VIGES BLOUESUO DE
Leadership or in other board committee or group, paid or	l, society, advocacy	XNone	mislogy of hypertension, you enould declare a even if that medication is not mentioned in it
1 Stock or stock		XNone	
2 Receipt of equipment of a community and a co	gs, medical	XNone	straturi su est escentias a
Other financial financial inter-		XNone	

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

MUDr. Michal Hrnčiarik

3107AR 2022

Date: 31.3.2022	
Your Name: Ondřej	Venclíček
Manuscript Title: _	Comedication with corticosteroids and nonsteroidal antiphlogistics does not affect
PD-L1 expression i	n non-small cell lung cancer
	<u> </u>
Manuscript number	r (if known): TCR-22-260-CL

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 <u>defined broadly</u>. 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)
	Ti	me frame: Since the initia	l 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.	XNone	
Time frame: past 36 months			

2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone
3	Royalties or licenses	XNone
4	Consulting fees	XNone
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone
6	Payment for expert testimony	XNone
7	Support for attending meetings and/or travel	XNone
8	Patents planned, issued or pending	_X_None
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone
11	Stock or stock options	XNone
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	XNone
13	Other financial or non- financial interests	X_None

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

I do not have any conflict of interest.		

Please place an "X" next to the following statement to indicate your agreement:
X I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date: 31.3.2022	
Your Name: PG	TR 7.3NA
Manuscript Title:	Comedication with corticosteroids and nonsteroidal antiphlogistics does not affect PD-L1
expression in non-sn	
Manuscript number	(if known): TCR-22-260-CL

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		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 initia	l 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.	X_None	
49/00		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

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

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

___ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

MUDI. Petr Zina

7-APIL-2022

Date: <u>9.4.2022</u>				
Your Name: Michal S	Svoboda			
Manuscript Title: Comedication with corticosteroids and nonsteroidal antiphlogistics does not affect PD-L1				
expression in non-sn	nall cell lung cancer			
Manuscript number	(if known): TCR-22-260-CL			

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		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.	XNone	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending	XNone	
	meetings and/or travel		
8	Patents planned, issued or	X None	
	pending		
	Pe		
9	Participation on a Data	X None	
•	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	X None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X None	
	•		
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
Ple	ease summarize the above o	onflict of interest in the fo	lowing box:
	None		

X I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date: 31.3.2022					
Your Name:	Jiri BLAZEK				
Manuscript Title:	Comedication with corticosteroids and nonsteroidal antiphlogistics does not affect PD-L1				
expression in non-small cell lung cancer					
Manuscript number (known): TCR-22-260-CL				
, ,					

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 <u>current</u> <u>manuscript only</u>.

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		Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution)
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.	XNone	praining of the work
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	X None	
3	Royalties or licenses	_X_None	
4	Consulting fees	XNone	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone	
6	Payment for expert testimony	XNone	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	_XNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	X_None	
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	XNone	
13	Other financial or non- financial interests	X_None	

lease s	summarize the above conflict of interest in the following box:	

Please place an "X" next to the following statement to indicate your agreement:	X
I certify that I have answered every question and have not altered the wording	ng of any of the questions on this

form.

Date: 31.3.2022		
Your Name:	MONIKA BAPTOVA	
Manuscript Title:_	Comedication with corticosteroids and nonsteroidal a	ntiphlogistics does not affect PD-L1
expression in non-	small cell lung cancer	
Manuscript number	er (if known): TCR-22-260-CL	

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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The author's relationships/activities/interests should be <u>defined broadly</u>. 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.

		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
		none (add rows as	
		needed)	
		Time frame: Since the initial	planning of the work
1	All support for the present	X_None	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		The state of the s
	据1946年,1946年,1946年	Time frame: past	36 months
2	Grants or contracts from	XNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	XNone	
		i equi gux	
4	Consulting fees	XNone	

5	Payment or honoraria for lectures, presentations,	_X_None	BMS, MSD, Astra Zeneca
	speakers bureaus, manuscript writing or educational events		
6	Payment for expert testimony	XNone	
7	Support for attending meetings and/or travel	XNone	ver in a regular or the hope of the
8	Patents planned, issued or pending	_XNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	Stock or stock options	XNone	
L2	Receipt of equipment, materials, drugs, medical writing, gifts or other services	XNone	
13	Other financial or non- financial interests	XNone	

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

I declare conflict of interest with societies BMS, MSD is Astra Janea for whiteh I present lectures and presentation in ancological topics in last 36 months.

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.

Date: 04.04.2022

Your Name: Andrea Müllerová

Comedication with corticosteroids and nonsteroidal antiphlogistics does not affect PD-L1 Manuscript Title: _

expression in non-small cell lung cancer

Manuscript number (if known): TCR-22-260-CL

parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment 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 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 <u>current</u> 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.

		Name all entities with specifications/Comm whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initial planning of the work	Specifications/Comments (e.g., if payments were made to you or to your institution) planning of the work
н	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.	None	
2	Grants or contracts from any entity (if not indicated in item #1 above).	Time frame: past 36 months None	36 months
m	Royalties or licenses	None	
4	Consulting fees	None	

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

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

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

X I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date: 31.3.2022					
Your Name: Bohuslava Vankova M.D.					
Manuscript Title:	Comedication with corticosteroids and nonsteroidal antiphlogistics does not affect PD-L1				
expression in non-s	small cell lung cancer				
Manuscript numbe	r (if known): TCR-22-260-CL				

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		Time frame: past	36 months
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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone			
	lectures, presentations,				
	speakers bureaus,				
	manuscript writing or				
	educational events				
6	Payment for expert	XNone			
	testimony				
7	Support for attending	XNone			
	meetings and/or travel				
8	Patents planned, issued or	X None			
	pending				
9	Participation on a Data	XNone			
	Safety Monitoring Board or				
	Advisory Board				
10	Leadership or fiduciary role	XNone			
	in other board, society,				
	committee or advocacy				
	group, paid or unpaid				
11	Stock or stock options	XNone			
12	Receipt of equipment, materials, drugs, medical	XNone			
	writing, gifts or other				
	services				
13	Other financial or non-	XNone			
	financial interests				
-	Please summarize the above conflict of interest in the following box:				
PIE	Please summarize the above conflict of interest in the following box:				
	none				

X I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date: 31.3.2022				
Your Name: Daniel Krejčí				
Manuscript Title: Comedication with corticosteroids and nonsteroidal antiphlogistics does not affect PD-L1				
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