

ICMJE DISCLOSURE FORM

Date: August 21, 2023
 Your Name: Tianming Zhang
 Manuscript Title: A prognostic nomogram based on LASSO Cox regression in patients with pulmonary large cell neuroendocrine carcinoma
 Manuscript number (if known): TCR-23-1061

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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		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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None.

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

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Date: August 21, 2023
 Your Name: Zhiqing Mao
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Date: August 21, 2023
 Your Name: Minghui Ma
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Your Name: Guangyan Li

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Date: August 21, 2023
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Your Name: Hong Wang

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