Date: March 6, 2021 Your Name: Jinmei Zhou

Manuscript Title: Benefit with re-challenge of immune checkpoint inhibitors in patient with metastatic triple-negative

breast cancer: a case report

Manuscript number (if known): TBCR-20-71-R1

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 initial	planning of the work
1	All support for the present	<u>√</u> None	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)  No time limit for this item.		
	No time mint for this item.		
		Time frame: past	36 months
2	Grants or contracts from		50 months
2		_ <u>√</u> None	
	any entity (if not indicated in item #1 above).		
3	Royalties or licenses	√ None	
3	Noyanies of ficerises	<u>v</u> Notic	
4	Consulting fees	√ None	

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

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

Jinmei Zhou has no conflict of interest to declare.	

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

Date: March 6, 2021 Your Name: Tao Wang

Manuscript Title: Benefit with re-challenge of immune checkpoint inhibitors in patient with metastatic triple-negative

breast cancer: a case report

Manuscript number (if known): TBCR-20-71-R1

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	medical writing, article processing charges, etc.)		
	No time limit for this item.		
	No time mint for this item.		
		Time frame: past	26 months
2	Consists on a subsect form	Time frame: past	56 MONUIS
2	Grants or contracts from	<u>√</u> None	
	any entity (if not indicated in item #1 above).		
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3	Royalties or licenses	<u>√</u> None	
4	Consulting fees	<u>√</u> None	

5	Payment or honoraria for lectures, presentations,	_√_None	
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	√ None	
Ü	testimony	<u>v</u> ivone	
	,		
7	Support for attending	<u>√</u> None	
	meetings and/or travel		
8	Patents planned, issued or	<u>√</u> None	
	pending		
9	Participation on a Data	<u>√</u> None	
	Safety Monitoring Board or Advisory Board		
10	Leadership or fiduciary role	√ None	
10	in other board, society,	<u>√</u> None	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	_√None	
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12	Receipt of equipment, materials, drugs, medical	<u>√</u> None	
	writing, gifts or other		
	services		
13	Other financial or non-	_√ None	
	financial interests	_	
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PIE	iase summarize the above c	oninct of interest in the fo	HOWIDE BOX:

Tao Wang has no conflict of interest to declare.		

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

Date: March 6, 2021 Your Name: Li Bian

Manuscript Title: Benefit with re-challenge of immune checkpoint inhibitors in patient with metastatic triple-negative

breast cancer: a case report

Manuscript number (if known): TBCR-20-71-R1

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	No time mint for this item.		
		Time frame: past	36 months
2	Grants or contracts from		50 months
2		_ <u>√</u> None	
	any entity (if not indicated in item #1 above).		
3	Royalties or licenses	√ None	
3	Noyanies of ficerises	<u>v</u> Notic	
4	Consulting fees	√ None	

5	Payment or honoraria for	_√_None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	√ None	
Ü	testimony	<u>v</u> ivone	
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7	Support for attending meetings and/or travel	<u>√</u> None	
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8	Patents planned, issued or	<u>√</u> None	
	pending		
9	Participation on a Data	√ None	
9	Safety Monitoring Board or	None	
	Advisory Board		
10	Leadership or fiduciary role	√ None	
	in other board, society,	_	
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	<u>√</u> None	
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12	Receipt of equipment, materials, drugs, medical	None	
	writing, gifts or other		
	services		
13	Other financial or non-	_√ None	
	financial interests		
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PIE	ease summarize the above c	ontlict of interest in the to	liowing box:

Li Bian has no conflict of interest to declare.

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

Date: March 6, 2021 Your Name: Jianbin Li

Manuscript Title: Benefit with re-challenge of immune checkpoint inhibitors in patient with metastatic triple-negative

breast cancer: a case report

Manuscript number (if known): TBCR-20-71-R1

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4	Consulting fees	√ None	

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

Jianbin Li has no conflict of interest to declare.

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

Date: March 6, 2021 Your Name: Zefei Jiang

Manuscript Title: Benefit with re-challenge of immune checkpoint inhibitors in patient with metastatic triple-negative

breast cancer: a case report

Manuscript number (if known): TBCR-20-71-R1

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		Time frame: past	26 months		
Time frame: past 36 months  2 Grants or contracts from √ None					
2	Grants or contracts from	None			
	any entity (if not indicated in item #1 above).				
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3	Royalties or licenses	_ <u>√</u> None			
4	Consulting fees	√ None			
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5	Payment or honoraria for	<u>√</u> None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	√ None	
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7	Support for attending meetings and/or travel	_ <u>√</u> None	
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8	Patents planned, issued or	<u>√</u> None	
	pending		
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9	Participation on a Data	<u>√</u> None	
	Safety Monitoring Board or Advisory Board		
10	Leadership or fiduciary role	√ None	
10	in other board, society,	<u>√</u> None	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	<u>√</u> None	
12	Receipt of equipment,	<u>√</u> None	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-	<u>√</u> None	
	financial interests		

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Zefei Jiang has no conflict of interest to declare.				

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

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