

## ICMJE DISCLOSURE FORM

Date: 2022/11/30  
 Your Name: Yingying Jiang  
 Manuscript Title: Efficacy of alectinib in ALK-positive non-small cell lung cancer and the predictive value of blood markers for prognosis and efficacy: a retrospective cohort study  
 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)
<b>Time frame: Since the initial planning of the work</b>			
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) <b>No time limit for this item.</b>	<u>  X  </u> None	
<b>Time frame: past 36 months</b>			
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: 2022/11/30

Your Name: Yue Shi

Manuscript Title: Efficacy of alectinib in ALK-positive non-small cell lung cancer and the predictive value of blood markers for prognosis and efficacy: a retrospective cohort study

Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: 2022/11/30

Your Name: Yiling Liu

Manuscript Title: Efficacy of alectinib in ALK-positive non-small cell lung cancer and the predictive value of blood markers for prognosis and efficacy: a retrospective cohort study

Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: 2022/11/30  
 Your Name: Zihan Wang  
 Manuscript Title: Efficacy of alectinib in ALK-positive non-small cell lung cancer and the predictive value of blood markers for prognosis and efficacy: a retrospective cohort study  
 Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: 2022/11/30

Your Name: Yuxin Ma

Manuscript Title: Efficacy of alectinib in ALK-positive non-small cell lung cancer and the predictive value of blood markers for prognosis and efficacy: a retrospective cohort study

Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: 2022/11/30  
 Your Name: Xinhong Shi  
 Manuscript Title: Efficacy of alectinib in ALK-positive non-small cell lung cancer and the predictive value of blood markers for prognosis and efficacy: a retrospective cohort study  
 Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: 2022/11/30

Your Name: Lin Lu

Manuscript Title: Efficacy of alectinib in ALK-positive non-small cell lung cancer and the predictive value of blood markers for prognosis and efficacy: a retrospective cohort study

Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: 2022/11/30  
 Your Name: Zhitong Wang  
 Manuscript Title: Efficacy of alectinib in ALK-positive non-small cell lung cancer and the predictive value of blood markers for prognosis and efficacy: a retrospective cohort study  
 Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: 2022/11/30  
 Your Name: Hang Li  
 Manuscript Title: Efficacy of alectinib in ALK-positive non-small cell lung cancer and the predictive value of blood markers for prognosis and efficacy: a retrospective cohort study  
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Date: 2022/11/30  
 Your Name: Yushu Zhang  
 Manuscript Title: Efficacy of alectinib in ALK-positive non-small cell lung cancer and the predictive value of blood markers for prognosis and efficacy: a retrospective cohort study  
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Date: 2022/11/30  
 Your Name: Caolu Liu  
 Manuscript Title: Efficacy of alectinib in ALK-positive non-small cell lung cancer and the predictive value of blood markers for prognosis and efficacy: a retrospective cohort study  
 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.

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<b>Time frame: Since the initial planning of the work</b>			
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) <b>No time limit for this item.</b>	<u>  X  </u> None	
<b>Time frame: past 36 months</b>			
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: 2022/11/30

Your Name: Shaorui Zhang

Manuscript Title: Efficacy of alectinib in ALK-positive non-small cell lung cancer and the predictive value of blood markers for prognosis and efficacy: a retrospective cohort study

Manuscript number (if known): \_\_\_\_\_

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None

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## ICMJE DISCLOSURE FORM

Date: 2022/11/30  
 Your Name: Zhihao Zhong  
 Manuscript Title: Efficacy of alectinib in ALK-positive non-small cell lung cancer and the predictive value of blood markers for prognosis and efficacy: a retrospective cohort study  
 Manuscript number (if known): \_\_\_\_\_

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None

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## ICMJE DISCLOSURE FORM

Date: 2022/11/30

Your Name: Jianwei Lu

Manuscript Title: Efficacy of alectinib in ALK-positive non-small cell lung cancer and the predictive value of blood markers for prognosis and efficacy: a retrospective cohort study

Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: 2022/11/30

Your Name: Meiqi Shi

Manuscript Title: Efficacy of alectinib in ALK-positive non-small cell lung cancer and the predictive value of blood markers for prognosis and efficacy: a retrospective cohort study

Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: 2022/11/30

Your Name: Bo Shen

Manuscript Title: Efficacy of alectinib in ALK-positive non-small cell lung cancer and the predictive value of blood markers for prognosis and efficacy: a retrospective cohort study

Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: 2022/11/30

Your Name: Guoren Zhou

Manuscript Title: Efficacy of alectinib in ALK-positive non-small cell lung cancer and the predictive value of blood markers for prognosis and efficacy: a retrospective cohort study

Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: 2022/11/30

Your Name: Rong Yin

Manuscript Title: Efficacy of alectinib in ALK-positive non-small cell lung cancer and the predictive value of blood markers for prognosis and efficacy: a retrospective cohort study

Manuscript number (if known): \_\_\_\_\_

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<b>Time frame: past 36 months</b>			
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## ICMJE DISCLOSURE FORM

Date: 11/24/2022

Your Name: Domenico Galetta, MD, PhD

Manuscript Title: Efficacy of alectinib in ALK-positive non-small cell lung cancer and the predictive value of blood markers for prognosis and efficacy: a retrospective cohort study

Manuscript number (if known): \_\_\_\_\_

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  X   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: 2022/11/29

Your Name: Anna Grenda

Manuscript Title: Efficacy of alectinib in ALK-positive non-small cell lung cancer and the predictive value of blood markers for prognosis and efficacy: a retrospective cohort study

Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date: 22<sup>nd</sup> November 2022

Your Name: Atocha Romero

Manuscript Title: Efficacy of alectinib in ALK-positive non-small cell lung cancer and the predictive value of blood markers for prognosis and efficacy: a retrospective cohort study

Manuscript number (if known): \_\_\_\_\_

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

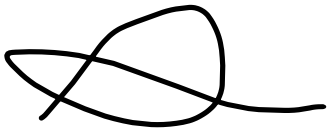
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	___ None	
6	Payment for expert testimony	___ None	
7	Support for attending meetings and/or travel	___	Thermofisher, BMS
8	Patents planned, issued or pending	___ None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	___ None	Takeda
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	___ None	
11	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	

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

AR declares consulting fees from AstraZeneca, participation on advisory board (Takeda), supporting for attending to meetings from Thermofisher and BMS.

**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.**



## ICMJE DISCLOSURE FORM

Date: 23 November 2022

Your Name: Brett Hughes

Manuscript Title: Efficacy of alectinib in ALK-positive non-small cell lung cancer and the predictive value of blood markers for prognosis and efficacy: a retrospective cohort study

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.

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

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	___ None	
6	Payment for expert testimony	___ None	
7	Support for attending meetings and/or travel	___ None	
8	Patents planned, issued or pending	___ None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	Merck Sharpe and Dohme	Advisory Board
		Eisai	
		Pfizer	
		Sanofi	
		Takeda	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	___ None	
11	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	

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

BGH declares Advisory Board of Merck, Sharpe and Dohme; Eisai; Pfizer; Sanofi; Takeda.

**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.**

## ICMJE DISCLOSURE FORM

Date: 2022/11/30  
 Your Name: Cheng Chen  
 Manuscript Title: Efficacy of alectinib in ALK-positive non-small cell lung cancer and the predictive value of blood markers for prognosis and efficacy: a retrospective cohort study  
 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.

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1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) <b>No time limit for this item.</b>	<u>  X  </u> None	
<b>Time frame: past 36 months</b>			
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: 2022/11/30  
 Your Name: Xiaohua Wang  
 Manuscript Title: Efficacy of alectinib in ALK-positive non-small cell lung cancer and the predictive value of blood markers for prognosis and efficacy: a retrospective cohort study  
 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.

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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	
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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

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## ICMJE DISCLOSURE FORM

Date: 2022/11/30

Your Name: Jifeng Feng

Manuscript Title: Efficacy of alectinib in ALK-positive non-small cell lung cancer and the predictive value of blood markers for prognosis and efficacy: a retrospective cohort study

Manuscript number (if known): \_\_\_\_\_

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<b>Time frame: past 36 months</b>			
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	

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