

ICMJE DISCLOSURE FORM

Date: 11/28/2023
 Your Name: Arwa Abdelhamid
 Manuscript Title: Antibiotic Treatment and Survival in NSCLC Patients Receiving Immunotherapy: A Systematic Review and Meta-Analysis
 Manuscript number (if known): TLCR-23-597

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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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Date: 11/28/2023
 Your Name: Stephanie Tuminello
 Manuscript Title: Antibiotic Treatment and Survival in NSCLC Patients Receiving Immunotherapy: A Systematic Review and Meta-Analysis
 Manuscript number (if known): TLCR-23-597

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Date: 11/28/2023
 Your Name: Tara Ivic-Pavlicic
 Manuscript Title: Antibiotic Treatment and Survival in NSCLC Patients Receiving Immunotherapy: A Systematic Review and Meta-Analysis
 Manuscript number (if known): TLCR-23-597

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ICMJE DISCLOSURE FORM

Date: 11/28/2023
 Your Name: Raja Flores, MD
 Manuscript Title: Antibiotic Treatment and Survival in NSCLC Patients Receiving Immunotherapy: A Systematic Review and Meta-Analysis
 Manuscript number (if known): TLCR-23-597

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ICMJE DISCLOSURE FORM

Date: 11/24/2023
 Your Name: Emanuela Taioli, MD PhD
 Manuscript Title: Antibiotic Treatment and Survival in NSCLC Patients Receiving Immunotherapy: A Systematic Review and Meta-Analysis
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