

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

Identifying information.

2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

3. Relevant financial activities outside the submitted work.

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

Relationships not covered above.

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Royalties: Funds are coming in to you or your institution due to your patent

Stangl-Kremser 1



Section 1.	Identifying Inform	nation	
1. Given Name (First Name) Judith		2. Surname (Last Name) Stangl-Kremser	3. Date 01-January-2020
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Shahrokh F. Shariat
5. Manuscript Title Therapeutic management of Bacillus Calmette–Gu		almette–Guerin refractory	patients: a narrative review
6. Manuscript Ider	ntifying Number (if you kr	now it)	
			_
Section 2.	The Work Under Co	onsideration for Public	cation
any aspect of the s statistical analysis,	ubmitted work (including	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Section 3.	Relevant financial	activities outside the s	submitted work.
Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to publication . Are there any relevant conflicts of interest? Yes Vo			
Section 4.			
	Intellectual Proper	ty Patents & Copyri	ghts
Do you have any	patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No

Stangl-Kremser 2



Section 5.		
Section 5.	Relationships not covered above	
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?		
Yes, the following relationships/conditions/circumstances are present (explain below):		
✓ No other relati	onships/conditions/circumstances that present a potential conflict of interest	
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements On occasion, journals may ask authors to disclose further information about reported relationships.		
Section 6.	Disclosure Statement	
Based on the above below.	ve disclosures, this form will automatically generate a disclosure statement, which will appear in the box	
Dr. Stangl-Kremse	er has nothing to disclose.	

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.

Stangl-Kremser 3



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Gust 1



Section 1. Identifying I	nformation		
1. Given Name (First Name) Kilian M.	2. Surname (Last Name) Gust	3. Date 01-January-2020	
4. Are you the corresponding author	? Yes ✓ No	Corresponding Author's Name Shahrokh F. Shariat	
5. Manuscript Title Therapeutic management of Baci	patients: a narrative review		
6. Manuscript Identifying Number (if	you know it)		
Section 2. The Work Un	der Consideration for Publi	cation	
Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)? Are there any relevant conflicts of interest? Yes No			
The there any relevant commets of	interest. Tes vine		
Section 3. Relevant fina	ncial activities outside the	submitted work.	
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Gust 2



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speaker's bureau:	ria or consultation fees: Cepheid, Ferring, Janssen, Roche, and MSD; participation in a company sponsored Astellas, Astra Zeneca, BMS, Ipsen, Janssen, MSD, and Roche. Meeting/traveling expenses: Allergan, neca, Bayer, BMS, Janssen, MSD, Novartis, Pfizer, Pierre Fabre, and Roche.
	nuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements nals may ask authors to disclose further information about reported relationships.
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company sponso	eceipt of honoraria or consultation fees: Cepheid, Ferring, Janssen, Roche, and MSD; participation in a red speaker's bureau: Astellas, Astra Zeneca, BMS, Ipsen, Janssen, MSD, and Roche. Meeting/traveling in, Astellas, Astra Zeneca, Bayer, BMS, Janssen, MSD, Novartis, Pfizer, Pierre Fabre, and Roche.

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Shariat 1



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1. Given Name (First Name) Shahrokh F.		2. Surname (Last Name) Shariat	3. Date 01-January-2020		
4. Are you the corresponding author?		✓ Yes No			
•	5. Manuscript Title Therapeutic management of Bacillus Calmette–Guerin refractory patients: a narrative review				
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•	F/and or speaker for Astellas, Astra Zeneca, Bayer, BMS, Cepheid, Ferring, Ipsen, Janssen, Lissy, MSD, Pierre Fabre, Roche, Sanochemia, Sanofi and Wolff.		
On occasion, jour	nuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements nals may ask authors to disclose further information about reported relationships. Disclosure Statement		
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below.			
	s advisory board of/and or speaker for Astellas, Astra Zeneca, Bayer, BMS, Cepheid, Ferring, Ipsen, Janssen, pus, Pfizer, Pierre Fabre, Roche, Sanochemia, Sanofi and Wolff		

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