

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Shuyan

2. Surname (Last Name)

Li

3. Date

04-July-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

Jianjiao Ni and Zhengfei Zhu

5. Manuscript Title

Synergistic drug administration in unresectable locally advanced non-small cell lung cancer: current landscape and future prospects in the era of immunotherapy

6. Manuscript Identifying Number (if you know it)

TLCR-20-512

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Dr. Li has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Xiao

2. Surname (Last Name)

Chu

3. Date

04-July-2020

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Jianjiao Ni and Zhengfei Zhu

5. Manuscript Title

Synergistic drug administration in unresectable locally advanced non-small cell lung cancer: current landscape and future prospects in the era of immunotherapy

6. Manuscript Identifying Number (if you know it)

TLCR-20-512

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Are there any relevant conflicts of interest?

Yes

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Dr. Chu has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Luxi

2. Surname (Last Name)

Ye

3. Date

04-July-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

Jianjiao Ni and Zhengfei Zhu

5. Manuscript Title

Synergistic drug administration in unresectable locally advanced non-small cell lung cancer: current landscape and future prospects in the era of immunotherapy

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TLCR-20-512

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Jianjiao

2. Surname (Last Name)

Ni

3. Date

04-July-2020

4. Are you the corresponding author?

Yes  No

5. Manuscript Title

Synergistic drug administration in unresectable locally advanced non-small cell lung cancer: current landscape and future prospects in the era of immunotherapy

6. Manuscript Identifying Number (if you know it)

TLCR-20-512

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### Section 1. Identifying Information

1. Given Name (First Name) Zhengfei      2. Surname (Last Name) Zhu      3. Date 04-July-2020

4. Are you the corresponding author?     Yes     No

5. Manuscript Title  
Synergistic drug administration in unresectable locally advanced non-small cell lung cancer: current landscape and future prospects in the era of immunotherapy

6. Manuscript Identifying Number (if you know it)  
TLCR-20-512

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Are there any relevant conflicts of interest?     Yes     No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
AstraZeneca	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Dr. Zhu reports personal fees from AstraZeneca, during the conduct of the study; .

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