

Supplementary Table 1. Prohibited concomitant treatments

Prohibited medication/class of drug:	Usage:
Any investigational anticancer therapy other than those under investigation in this study	Should not be given concomitantly whilst the patient is on study treatment
mAbs against CTLA-4, PD-1, or PD-L1 other than those under investigation in this study	Should not be given concomitantly whilst the patient is on study treatment
Any concurrent chemotherapy, radiotherapy, immunotherapy, or biologic or hormonal therapy for cancer treatment other than those under investigation in this study	Should not be given concomitantly whilst the patient is on study treatment. (Concurrent use of hormones for non-cancer-related conditions [e.g., insulin for diabetes and hormone replacement therapy] is acceptable. Local treatment of isolated lesions, excluding target lesions, for palliative intent is acceptable [e.g., by local surgery or radiotherapy])
Immunosuppressive medications including, but not limited to, systemic corticosteroids at doses exceeding 10 mg/day of prednisone or equivalent, methotrexate, azathioprine, and tumor necrosis factor- α blockers	Should not be given concomitantly or used for premedication prior to the I-O infusions. The following are allowed exceptions: <ul style="list-style-type: none"> • Use of immunosuppressive medications for the management of IP-related AEs, • Use in patients with contrast allergies. • In addition, use of inhaled, topical, and intranasal corticosteroids is permitted. • A temporary period of steroids will be allowed if clinically indicated and considered to be essential for the management of non-immunotherapy related events experienced by the patient (e.g., chronic obstructive pulmonary disease, radiation, nausea, etc.).

EGFR TKIs	Should not be given concomitantly. Should be used with caution in the 90 days post last dose of durvalumab. Increased incidences of pneumonitis (with third generation EGFR TKIs) and increased incidence of transaminase increases (with 1 st generation EGFR TKIs) has been reported when durvalumab has been given concomitantly.
Live attenuated vaccines	Should not be given through 30 days after the last dose of IP.
Drugs with a laxative effect (ex. magnesium oxide) and herbal and natural remedies which may have immune-modulating effects	Should not be given concomitantly.
Transfusion (Red cell concentrate, Platelet)	Should not be given during DLT period
G-CSF	Should not be given during DLT period