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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Oliver

2. Surname (Last Name)  
   Gautschi

3. Date  
   22-April-2020

4. Are you the corresponding author?  
   Yes ✔ No

5. Manuscript Title  
   Persistent N2 disease after neoadjuvant treatment...and now? The oncologist view

6. Manuscript Identifying Number (if you know it)  
   CCTS-2020-IIIA-03(CCTS-20-87)

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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.

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<td>Consultancy Agreement with AMGEN Europe since 2020.</td>
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Dr. Gautschi reports other from AMGEN, during the conduct of the study;

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Section 1. Identifying Information

1. Given Name (First Name)  Fabrizio
2. Surname (Last Name)  Minervini
3. Date  22-April-2020

4. Are you the corresponding author?  No

Corresponding Author’s Name  Oliver Gautschi

5. Manuscript Title
Persistent N2 disease after neoadjuvant treatment...and now? The oncologist view

6. Manuscript Identifying Number (if you know it)
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Dr. Minervini has nothing to disclose.

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1. Given Name (First Name)  Peter
2. Surname (Last Name)  Kestenholz
3. Date  22-April-2020
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   Corresponding Author’s Name  Oliver Gautschi
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