## ICMJE DISCLOSURE FORM

Date:\_\_21.04.2021\_

Your Name: Fabrizio Minervini

Manuscript Title:Controversies in the Management of Stage IIIA Non-Small-Cell Lung

Cancer

Manuscript number (if known):CCTS-2020-IIIA-10(CCTS-21-21).

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are

related to the content of your manuscript. "Related" means any relation with forprofit or not-for-profit third

parties whose interests may be affected by the content of the manuscript.

Disclosure represents a commitment

to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains

to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

		Name all entities	Specifications/Comments
		with whom you have this relationship or indicate none (add rows as needed)	(e.g., if payments were made to you or to your institution)
	Time 1	frame: Since the initia	al planning of the work
pres (e.g prov mat writ prov etc.	time limit for this	None	

		Time frame: past	: 36 months
2	Grants or contracts from any entity (if not indicated in item	None	
	#1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	
7	Consutting rees	None	
5	Payment or honoraria	None	
	for lectures, presentations,		
	speakers bureaus, manuscript writing or educational events		
6	Payment for expert testimony	None	
	cesemony		
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
	. 3		
0	De uticio atico con c	Maria	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None	
1	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None	
0			
1	Stock or stock options	None	
1			

1 2	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
1	Other financial or	None	
3	non-financial interests		

Please summarize the above conflict of interest in the following box:

NO conflict of interest
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Please place an "X" next to the following statement to indicate your agreement:

\_\_X\_ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

## ICMJE DISCLOSURE FORM

Date:\_\_21.04.2021\_ Your Name: Marco Scarci

Manuscript Title: Controversies in the Management of Stage IIIA Non-Small-Cell Lung

Cancer

Manuscript number (if known):CCTS-2020-IIIA-10(CCTS-21-21).

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are

related to the content of your manuscript. "Related" means any relation with forprofit or not-for-profit third

parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment

to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains

to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

Name all entities with whom you have this relationship or indicate none (add rows as needed)  Time frame: Since the initial planning of the work  All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.				
1 All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  No time limit for this			with whom you have this relationship or indicate none (add	(e.g., if payments were made to you or
present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this		Time	frame: Since the initia	al planning of the work
	1	present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this	None	

		Time frame: past 36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None
3	Royalties or licenses	None
4	Consulting fees	None
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None
6	Payment for expert testimony	None
7	Support for attending meetings and/or travel	None
8	Patents planned, issued or pending	None
9	Participation on a Data Safety Monitoring Board or Advisory Board	None
1 0	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None
1	Stock or stock options	None

1 2	Receipt of equipment, materials, drugs,	None	
	medical writing, gifts or other services		
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3	non-financial interests		

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