ICMJE Form for Disclosure of Potential Conflicts of Interest

1. Identifying information.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
Jiangfeng

2. Surname (Last Name)  
Wang

3. Date  
08-February-2021

4. Are you the corresponding author?  
Yes ☐  No ☑

Corresponding Author’s Name  
Youhua Jiang

5. Manuscript Title  
The safety and efficacy of neoadjuvant programmed death 1 inhibitor therapy with surgical resection in stage IIIA non-small cell lung cancer

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Are there any relevant conflicts of interest?  
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Yes ☐  No ☑

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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Dr. Wang has nothing to disclose.

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Jianqiang

2. Surname (Last Name)  
   Li

3. Date  
   08-February-2021

4. Are you the corresponding author?  
   ☑ No

Corresponding Author's Name  
Youhua Jiang

5. Manuscript Title  
The safety and efficacy of neoadjuvant programmed death 1 inhibitor therapy with surgical resection in stage IIIA non-small cell lung cancer

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<td>3. Date</td>
<td>08-February-2021</td>
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<td>4. Are you the corresponding author?</td>
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</tr>
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</table>

**Corresponding Author’s Name**
Youhua Jiang

**Manuscript Title**
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Dr. Cai has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Sheng

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   Chen

3. Date  
   08-February-2021

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   ☑ No

   Corresponding Author's Name  
   Youhua Jiang

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1. **Given Name (First Name)**
   - Youhua

2. **Surname (Last Name)**
   - Jiang

3. **Date**
   - 08-February-2021

4. **Are you the corresponding author?**
   - Yes [✓]  No [ ]

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