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4. **Intellectual Property.**

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**ICMJE Form for Disclosure of Potential Conflicts of Interest**

### Section 1. Identifying Information

1. Given Name (First Name)  
   Andrew
2. Surname (Last Name)  
   Barsky
3. Date  
   30-June-2020
4. Are you the corresponding author?  
   ✔ Yes  
   No
5. Manuscript Title  
   Initial clinical experience treating patients with palliative radiotherapy for malignant pleural mesothelioma on the Halcyon (TM) linear accelerator
6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest?  
   ✔ Yes  
   No

### Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest?  
   ✔ Yes  
   No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
   ✔ Yes  
   No
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

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Dr. Barsky has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Michele
2. Surname (Last Name) Kim
3. Date 30-June-2020
4. Are you the corresponding author? ☑ No

Corresponding Author's Name
Andrew Barsky

5. Manuscript Title
Initial clinical experience treating patients with palliative radiotherapy for malignant pleural mesothelioma on the Halcyon (TM) linear accelerator

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest? ☑ No

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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Kim 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) | Russell
2. Surname (Last Name) | Maxwell
3. Date | 30-June-2020
4. Are you the corresponding author? | ☐ Yes ☑ No
Corresponding Author's Name | Andrew Barsky

5. Manuscript Title
Initial clinical experience treating patients with palliative radiotherapy for malignant pleural mesothelioma on the Halcyon (TM) linear accelerator

6. Manuscript Identifying Number (if you know it)

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**Section 2. The Work Under Consideration for Publication**

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

---

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

---

**Section 4. Intellectual Property -- Patents & Copyrights**

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? | ☐ Yes ☑ No
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

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Dr. Maxwell 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)  
   Amberly

2. Surname (Last Name)  
   Mendes

3. Date  
   30-June-2020

4. Are you the corresponding author?  
   Yes  
   No  
   ✔

   Corresponding Author’s Name  
   Andrew Barsky

5. Manuscript Title  
   Initial clinical experience treating patients with palliative radiotherapy for malignant pleural mesothelioma on the Halcyon (TM) linear accelerator

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?  
   Yes  
   No  
   ✔

Section 3. Relevant financial activities outside the submitted work.

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   Yes  
   No  
   ✔

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
   Yes  
   No  
   ✔
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Dr. Mendes 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)  
   Christopher

2. Surname (Last Name)  
   Wright

3. Date  
   30-June-2020

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

Corresponding Author's Name  
Andrew Barsky

5. Manuscript Title
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   Yes ☐  No ☑

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Dr. Wright has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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<tbody>
<tr>
<td>Emily</td>
<td>Anstadt</td>
<td>30-June-2020</td>
</tr>
</tbody>
</table>

4. Are you the corresponding author? ☑ No

Corresponding Author’s Name
Andrew Barsky

5. Manuscript Title
Initial clinical experience treating patients with palliative radiotherapy for malignant pleural mesothelioma on the Halcyon (TM) linear accelerator

6. Manuscript Identifying Number (if you know it)

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Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☑ No
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Dr. Anstadt has nothing to disclose.

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1. Given Name (First Name)  
Sally

2. Surname (Last Name)  
McNulty

3. Date  
30-June-2020

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☐ Yes  ✔ No

Corresponding Author’s Name  
Andrew Barsky

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Dr. McNulty has nothing to disclose.

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1. Given Name (First Name)  
   Lei

2. Surname (Last Name)  
   Dong

3. Date  
   30-June-2020

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

   Corresponding Author’s Name  
   Andrew Barsky

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<td>Varian Medical Systems</td>
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Dr. Dong reports grants and personal fees from Varian Medical Systems, outside the submitted work.

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# ICMJE Form for Disclosure of Potential Conflicts of Interest

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<thead>
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<th>1. Given Name (First Name)</th>
<th>James</th>
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<tr>
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<td>Metz</td>
</tr>
<tr>
<td>3. Date</td>
<td>30-June-2020</td>
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<tr>
<td>4. Are you the corresponding author?</td>
<td>☑ No</td>
</tr>
<tr>
<td>Corresponding Author's Name</td>
<td>Andrew Barsky</td>
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5. Manuscript Title

Initial clinical experience treating patients with palliative radiotherapy for malignant pleural mesothelioma on the Halcyon (TM) linear accelerator

6. Manuscript Identifying Number (if you know it)

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1. Given Name (First Name)  
   Steven

2. Surname (Last Name)  
   Feigenberg

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   30-June-2020

4. Are you the corresponding author?  
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Corresponding Author's Name  
Andrew Barsky

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Dr. Feigenberg has nothing to disclose.

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Non-Financial Support: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

Other: Anything not covered under the previous three boxes

Pending: The patent has been filed but not issued

Issued: The patent has been issued by the agency

Licensed: The patent has been licensed to an entity, whether earning royalties or not

Royalties: Funds are coming in to you or your institution due to your patent

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**Section 1. Identifying Information**

<table>
<thead>
<tr>
<th>1. Given Name (First Name)</th>
<th>2. Surname (Last Name)</th>
<th>3. Date</th>
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<tr>
<td>Taoran</td>
<td>Li</td>
<td>30-June-2020</td>
</tr>
</tbody>
</table>

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

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Corresponding Author's Name  
Andrew Barsky

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5. Manuscript Title  
Initial clinical experience treating patients with palliative radiotherapy for malignant pleural mesothelioma on the Halcyon (TM) linear accelerator

6. Manuscript Identifying Number (if you know it)

---

**Section 2. The Work Under Consideration for Publication**

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?  
Are there any relevant conflicts of interest?  
☑ Yes  ☐ No

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**Section 3. Relevant financial activities outside the submitted work.**

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to publication.  
Are there any relevant conflicts of interest?  
☑ 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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At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

Section 6. Disclosure Statement

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Dr. Li has nothing to disclose.

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Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

1. Identifying information.

2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking “No” means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check “Yes”.

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This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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Use this section to report other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work.

Definitions.

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Section 1. Identifying Information

1. Given Name (First Name) Keith
2. Surname (Last Name) Cengel
3. Date 30-June-2020
4. Are you the corresponding author? ☑ No

Corresponding Author’s Name Andrew Barsky

5. Manuscript Title
Initial clinical experience treating patients with palliative radiotherapy for malignant pleural mesothelioma on the Halcyon (TM) linear accelerator

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