ICMJE DISCLOSURE FORM

Date: 2022-02-27

Your Name: Jing Wu

Manuscript Title: Prolonged progression-free survival after pyrotinib therapy for HER2-positive recurrent ovarian clear cell carcinoma: a case report

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 for-profit 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 current manuscript only.

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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) | Specifications/Comments (e.g., if payments were made to you or to your institution) |
|---|---|-------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| 1 | All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) | ____None |  |
|   | No time limit for this item. |   |   |

**Time frame: Since the initial planning of the work**

|   |   |   |   |
|---|---|---|---|

**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 |   |   |
|   | Conflict of Interest                                                                 | Answer |
|---|-------------------------------------------------------------------------------------|--------|
| 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   |
| 10| Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid | None   |
| 11| Stock or stock options                                                              | None   |
| 12| Receipt of equipment, materials, drugs, medical writing, gifts or other services     | None   |
| 13| Other financial or non-financial interests                                           | None   |

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

For above items, I have no conflicts of interest to declare.

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: 2022-03-12
Your Name: Yang You
Manuscript Title: Prolonged progression-free survival after pyrotinib therapy for HER2-positive recurrent ovarian clear cell carcinoma: a case report
Manuscript number (if known):

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| 4 | Consulting fees | None |
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ICMJE DISCLOSURE FORM

Date: __________ 2022–03–12
Your Name: ______ Rongyuan Zhuang
Manuscript Title: Prolonged progression-free survival after pyrotinib therapy for HER2-positive recurrent ovarian clear cell carcinoma: a case report
Manuscript number (if known):

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| 3 | Royalties or licenses | None                                                                            |
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Date: 2022–03–12
Your Name: Xi Guo
Manuscript Title: Prolonged progression-free survival after pyrotinib therapy for HER2-positive recurrent ovarian clear cell carcinoma: a case report
Manuscript number (if known):

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| **Time frame: past 36 months** | | |
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Date:___________2022–03–12_________________________________________________________________

Your Name:______Chenlu Zhang _____________________________________________________________________

Manuscript Title:Prolonged progression-free survival after pyrotinib therapy for HER2-positive recurrent ovarian clear cell carcinoma: a case report
Manuscript number (if known):

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Date:___________2022–03–12________________________________________
Your Name:______ Qi Zhang _____________________________________________________________________________
Manuscript Title:Prolonged progression-free survival after pyrotinib therapy for HER2-positive recurrent ovarian clear cell carcinoma: a case report
Manuscript number (if known):

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Date: 2022-03-12

Your Name: Yuhong Zhou

Manuscript Title: Prolonged progression-free survival after pyrotinib therapy for HER2-positive recurrent ovarian clear cell carcinoma: a case report

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|   | **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                                                                               |
|   | Description                                                                 | 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 |
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Date: ___________2022-03-12______________________________________________________________
Your Name: ______ Qian Li _____________________________________________________________

Manuscript Title: Prolonged progression-free survival after pyrotinib therapy for HER2-positive recurrent ovarian clear cell carcinoma: a case report
Manuscript number (if known):

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