Date	e: <u>5/3/2021</u>		
You	r Name: <u>Pooja Srikanth</u>		
Mar	nuscript Title: Narrative Rev	iew of the Current Manage	ement of Radiation-Induced Ureteral Strictures of the Pelvis
Mar	nuscript number (if known):	AMJ-2020-RUR-09(AMJ-2	1-5)
rela part to ti	ted to the content of your n ies whose interests may be	nanuscript. "Related" mea affected by the content of ecessarily indicate a bias.	relationships/activities/interests listed below that are ns any relation with for-profit or not-for-profit third f the manuscript. Disclosure represents a commitment If you are in doubt about whether to list a so.
	following questions apply to nuscript only.	o the author's relationship	os/activities/interests as they relate to the <u>current</u>
to tl		nsion, you should declare	defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive he manuscript.
	em #1 below, report all sup time frame for disclosure is	-	in this manuscript without time limit. For all other items,
		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
		none (add rows as	·
		needed)	
		Time frame: Since the initia	l planning of the work
1	All support for the present	XNone	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)  No time limit for this item.		
	No time limit for this item.		
		Time frame: past	: 36 months
2	Grants or contracts from	XNone	
	any entity (if not indicated		
2	in item #1 above).	V. Nava	
3	Royalties or licenses	XNone	

Consulting fees

X\_\_None

			<del>-</del>
5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	X None	
	financial interests		

None.			

Please place an "X" next to the following statement to indicate your agreement:

Date	e: <u>5/3/2021</u>			
You	r Name: <u>Hannah E Kay</u>			
Mar	nuscript Title: Narrative Rev	iew of the Current Manage	ement of Radiation-Induced Ureteral Strictures of the Pelvi	S
Mar	nuscript number (if known):	AMJ-2020-RUR-09(AMJ-2	1-5)	
rela part to ti	ted to the content of your name ies whose interests may be ransparency and does not no	nanuscript. "Related" mea affected by the content of ecessarily indicate a bias.	relationships/activities/interests listed below that are ns any relation with for-profit or not-for-profit third the manuscript. Disclosure represents a commitment If you are in doubt about whether to list a	
The	tionship/activity/interest, it following questions apply to nuscript only.		os/activities/interests as they relate to the <u>current</u>	
to t		nsion, you should declare	lefined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive ne manuscript.	
	em #1 below, report all sup time frame for disclosure is	·	l in this manuscript without time limit. For all other items,	
		Name all entities with	Specifications/Comments	
		whom you have this	(e.g., if payments were made to you or to your	
		relationship or indicate	institution)	
		none (add rows as		
		needed)		
		Time frame: Since the initia	l planning of the work	
1	All support for the present	XNone		
	manuscript (e.g., funding,			
	provision of study materials,			
	medical writing, article processing charges, etc.)			
	No time limit for this item.			
		Time frame: past	26 months	
2	Grants or contracts from	X None	. So months	
_	any entity (if not indicated			
	in item #1 above).			
3	Royalties or licenses	X None		

Consulting fees

\_X\_\_None

			<del>-</del>
5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	X None	
	financial interests		

None.			

Please place an "X" next to the following statement to indicate your agreement:

Date	e: <u>5/3/2021</u>		
You	r Name: <u>Adan N Tijerina</u>		
Maı	nuscript Title: Narrative Revi	iew of the Current Manage	ment of Radiation-Induced Ureteral Strictures of the Pelvi
Maı	nuscript number (if known):	AMJ-2020-RUR-09(AMJ-21	5)
In th	an interest of transparency	wo ack you to displace all t	relationships/activities/interests listed helow that are
rela part	ted to the content of your nies whose interests may be	nanuscript. "Related" mean affected by the content of	relationships/activities/interests listed below that are relation with for-profit or not-for-profit third the manuscript. Disclosure represents a commitment f you are in doubt about whether to list a
rela	tionship/activity/interest, it	is preferable that you do	60.
	following questions apply to uscript only.	o the author's relationship	s/activities/interests as they relate to the <u>current</u>
to t		nsion, you should declare a	efined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive the manuscript.
	em #1 below, report all sup time frame for disclosure is		in this manuscript without time limit. For all other items,
		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
		none (add rows as	
		needed)	
		Time frame: Since the initial	planning of the work
1	All support for the present	X None	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	X None	
_	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	XNone	

Consulting fees

X\_\_None

			<del>-</del>
5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	X None	
	financial interests		

None.			

Please place an "X" next to the following statement to indicate your agreement:

Date	e: <u>5/3/2021</u>		
You	r Name: <u>Arjun V Srivastava</u>		
	nuscript Title: <u>Narrative Revi</u> nuscript number (if known):		ement of Radiation-Induced Ureteral Strictures of the Pelvis  1-5)
rela part to ti	ted to the content of your miles whose interests may be	nanuscript. "Related" mea affected by the content o ecessarily indicate a bias.	relationships/activities/interests listed below that are ins any relation with for-profit or not-for-profit third f the manuscript. Disclosure represents a commitment If you are in doubt about whether to list a so.
	following questions apply to nuscript only.	o the author's relationship	os/activities/interests as they relate to the <u>current</u>
to t		nsion, you should declare	defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive he manuscript.
	em #1 below, report all sup time frame for disclosure is	·	d in this manuscript without time limit. For all other items,
		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)
		Time frame: Since the initia	l planning of the work
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 item.	XNone	
		Time frame: pas	t 36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	X_None	
3	Royalties or licenses	XNone	

Consulting fees

\_X\_\_None

6	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert testimony	XNone			
7	Support for attending meetings and/or travel	XNone			
8	Patents planned, issued or pending	XNone			
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone			
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone			
11	Stock or stock options	XNone			
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None			
13	Other financial or non- financial interests	XNone			
Ples	Please summarize the above conflict of interest in the following box:				

Please place an "X" next to the following statement to indicate your agreement:

None.

Dat	e: <u>5/3/2021</u>		
You	r Name: <u>Aaron A Laviana</u>		
Ma	nuscript Title: Narrative Rev	iew of the Current Manag	ement of Radiation-Induced Ureteral Strictures of the Pelvis
Ma	nuscript number (if known):	AMJ-2020-RUR-09(AMJ-2	21-5)
			relationships/activities/interests listed below that are
	<del>-</del>		ans any relation with for-profit or not-for-profit third
-	<u>-</u>	=	f the manuscript. Disclosure represents a commitment
		<del>-</del>	If you are in doubt about whether to list a
reia	tionship/activity/interest, it	is preferable that you do	50.
	following questions apply t	o the author's relationshi	ps/activities/interests as they relate to the <u>current</u>
			defined broadly. For example, if your manuscript pertains
			all relationships with manufacturers of antihypertensive
me	dication, even if that medica	tion is not mentioned in t	the manuscript.
In 14	tom #1 holour ronart all cun	nort for the work renerte	d in this manuscript without time limit. For all other items
	time frame for disclosure is		d in this manuscript without time limit. For all other items,
tile	tille frame for disclosure is	the past 50 months.	
		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
		none (add rows as needed)	
		Time frame: Since the initi	al planning of the work
1	All support for the present	X None	
1	manuscript (e.g., funding,	^NOTIE	
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: pas	st 36 months
2	Grants or contracts from	XNone	
	any entity (if not indicated		
3	in item #1 above).  Royalties or licenses	V None	
	I NOVALLIES OF IICELISES	X None	

Consulting fees

X\_\_None

			<del>-</del>
5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical	X_None	
	writing, gifts or other		
	services		
13	Other financial or non-	X None	
	financial interests		

None.			

Please place an "X" next to the following statement to indicate your agreement:

Dat	e: <u>5/3/2021</u>			
You	r Name: <u>J Stuart Wolf Jr.</u>			
Mai	nuscript Title: Narrative Rev	iew of the Current Manage	ement of Radiation-Induced Ureteral Strictures of the Pe	lvis
Maı	nuscript number (if known):	AMJ-2020-RUR-09(AMJ-22	<u>l-5)</u>	
rela	ted to the content of your n	nanuscript. "Related" mea	relationships/activities/interests listed below that are ns any relation with for-profit or not-for-profit third the manuscript. Disclosure represents a commitment	
	ransparency and does not n tionship/activity/interest, it	•	If you are in doubt about whether to list a so.	
	following questions apply t nuscript only.	o the author's relationship	s/activities/interests as they relate to the current	
to t	- ·	nsion, you should declare	lefined broadly. For example, if your manuscript pertain all relationships with manufacturers of antihypertensive ne manuscript.	
	em #1 below, report all sup time frame for disclosure is	· · · · · · · · · · · · · · · · · · ·	l in this manuscript without time limit. For all other iten	15,
		Name all entities with	Specifications/Comments	
		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 frame: Since the initia	l planning of the work	
1	All support for the present manuscript (e.g., funding, provision of study materials,	XNone		
	medical writing, article			
	processing charges, etc.)  No time limit for this item.			
	No time inine for this item.			
		Time frame: past	36 months	
2	Grants or contracts from	XNone		
	any entity (if not indicated			
	in item #1 above).			
2	Royalties or licenses	Y None		

4

Consulting fees

\_X\_\_None

			<del>-</del>
5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical	X_None	
	writing, gifts or other		
	services		
13	Other financial or non-	X None	
	financial interests		

None.			

Please place an "X" next to the following statement to indicate your agreement:

Date: 5/3/2021
Your Name:E. Charles Osterberg
Manuscript Title: Narrative Review of the Current Management of Radiation-Induced Ureteral Strictures of the Pelvis
Manuscript number (if known): AMJ-2020-RUR-09(AMJ-21-5)

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 <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	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
		none (add rows as	•
		needed)	
		•	
		Time frame: Since the initial	planning of the work
1	All support for the present	XNone	
	manuscript (e.g., funding,		
	provision of study materials, medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
	No time minic for this item.		
		Time frame: past	36 months
2	Grants or contracts from	XNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for lectures, presentations,	XNone	
	speakers bureaus, manuscript writing or educational events		
6	Payment for expert testimony	XNone	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data	X None	
	Safety Monitoring Board or Advisory Board		
10	Leadership or fiduciary role in other board, society,	XNone	
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non- financial interests	XNone	

None.	

Please place an "X" next to the following statement to indicate your agreement: