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NRG Oncology Publications Policy & Guidelines

Version 8: October 29, 2025

Publications Policy

General Considerations

- Authors must fulfill [ICMJE Stipulations for Authorship](#) as well as the NRG Oncology Publications Rules for Authorship.
- Accrual authors will be prioritized.
- With the exception of the Principal Investigator/Study Chair, NRG Statistician, and Disease Site or NCORP/PCOR Chair, individuals who appear on the protocol cover sheet are not guaranteed a position on the author line.
- NRG Oncology is required to comply with the 2024 NIH Public Access Policy, implemented July 1, 2025, requiring the “submission of an electronic version of the Author Accepted Manuscript to PubMed Central upon its acceptance for publication for public availability without embargo upon the Official Date of Publication”. All manuscripts must contain disclaimers regarding NIH Public Access as well as Funding requirements. (See NRG Publication Guidelines Section III.3.A, Publication Process). See <https://grants.nih.gov/policy-and-compliance/policy-topics/public-access>.

I. Publications Committee Bylaws Charter

The purpose of the Publications Committee is to promote and facilitate the publication of studies to ensure that NRG Oncology (NRG) results are published in a timely manner, assure authorship lines are appropriate and fair, review abstracts, presentations, and manuscripts, assure timely reporting by assigning or reassigning responsibility, monitor compliance with the Publications Policy, and propose recommendations to update the Publications Policy as necessary. The Publications Committee will consider and adjudicate appeals and/or disputes related to publications and will issue recommendations to the Group Chairs for final decisions.

Composition - The Publications Committee shall be comprised of no more than 15 members (exclusive of leadership and staff) and will include a balance of medical and research disciplines with at least one member representing the NRG Oncology NCI Community Oncology Research Program (NCORP) and at least one disease site or other NRG Oncology committee chair. Membership on the Committee is maintained in accordance with the NRG Oncology Committee Membership Guidelines.. The Publications Committee is led by the Chair for Scientific Publications. The chair of the committee reports to the Deputy Group Chair for Publications and Communications.

II. Introduction

NRG Oncology recognizes the critical importance of the timely and accurate publication of the results of its clinical trials.

The NRG Oncology **Publications Committee** oversees all aspects of the publication process for NRG Oncology, to ensure timely and accurate reporting of the results of all NRG Oncology clinical trials and corresponding projects. The Publications Committee consists of members who represent the group’s diverse membership.

The **NRG Oncology Deputy Group Chair for Publications and Communications** oversees the Publications Committee, reports to the NRG Oncology Executive Committee, and serves in that capacity in accordance with the NRG Oncology Group Bylaws.

The NRG Oncology **Publications Policy** applies to any publication – including abstracts, presentations, manuscripts, treatment atlases, and white or review papers – which utilizes NRG Oncology data or resources or is a summary of NRG Oncology procedures. This Policy is in accordance with National Cancer Institute (NCI) National Clinical Trials Network (NCTN) Program Guidelines, which govern the conduct of NCTN member groups such as NRG Oncology. (See: NCI Terms/Conditions of Award document, pg. 38, [National Cancer Institute National Clinical Trials Network Program Guidelines](#)). The policy also follows the International Committee of Medical Journal Editors' (ICMJE) [Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals](#) summarized as follows:

- Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work; AND
- Drafting the work or revising it critically for important intellectual content; AND
- Final approval of the version to be published; AND
- Agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved

III. Roles and Responsibilities

NRG Oncology Publications Committee - The committee is responsible for regulating the dissemination of NRG Oncology research results to the scientific and lay communities by promoting and facilitating publication of NRG Oncology trial results and corresponding projects in a timely manner. The committee, through its Chair and Vice Chairs, achieves this objective by:

1. Developing, reviewing, and making recommended changes to the Publications Policy and Guidelines to the Deputy Group Chair of Publications and Communications and for Group Chairs' approval.
2. Assuring the quality of all abstracts and manuscripts that use NRG Oncology study data or are endorsed by NRG Oncology (e.g., white papers and atlases) prior to submission for publication or presentation.
3. Determining and approving authorship lines and all requested changes, with input from the first author, the assigned NRG Oncology statistician, and the responsible committee chair, for all publications according to the NRG Oncology Publications Guidelines, which recognize the contributions of investigators involved in the development, conduct, and analysis of the study or project. There will be flexibility in applying the guidelines, as long as authorships are consistent with ICMJE recommendations.
4. Monitoring the progress and timeliness of publication submissions related to NRG Oncology research. **The committee may reassign publication authorship if a first or other author does not fulfill his/her responsibilities in a timely manner.** The committee monitors Publications Policy violations and recommends further appropriate actions to the NRG Oncology Executive Committee as warranted.
5. Developing and maintaining the NRG Oncology Publication Guidelines and associated procedures.

Protocol Principal Investigator/Study Chair (PI) - The protocol PI is responsible for preparing presentations/publications disseminating the results of the primary endpoint analysis according to the Timelines in Section IV. The PI is generally the first author of primary endpoint publications.

First Author - The first author, who may also be the protocol PI, is responsible for:

1. Assuring the integrity of the work.
2. Adhering to the NRG Oncology Publications Policy and Guidelines, including submission of the publication to the NRG Oncology Publications Department in order to meet grant requirements and the Timelines guidance of this policy (Section IV).
3. Completing appropriate study chair reviews (when applicable) prior to commencement of data analysis.
4. Working with the protocol/project team, which may include the responsible committee chair, NRG Oncology Statistics and Data Management Center (SDMC), and Publications Department Staff, to develop the initial draft of the abstract/manuscript.
5. Working with the SDMC team to make authorship recommendations to the Publications Department Staff and abiding by the decisions of the Publications Committee, including the designated author line.
6. Ensuring that all co-authors have had the opportunity to review and provide feedback for all publications and presentations, with assistance from the Publications Department Staff.
7. In collaboration with the Publications Department Staff, ensuring that abstracts and manuscripts are submitted in a timely manner.

Corresponding Author – The first author may designate a corresponding author for a publication. If a corresponding author is identified, the corresponding author will be included on all communications to the first author.

Co-authors – The co-authors must review and approve abstracts, presentations, and manuscripts in a timely manner and complete required conflict of interest disclosures in order to maintain co-authorship. Failure to respond to three documented communications will result in removal from the author line, after approval of the committee chair (see Exhibit 1, for example of third notice).

ALL Authors are advised to keep their contact information up to date either via the NCI Clinical Trials Support Unit (CTSU) portal (<https://ctsu.cancer.gov/>), (the most common practice), or by notifying NRG-Publications@NRGOncology.org directly.

NRG Oncology Publications Department – The Publications Department is responsible for ensuring timely preparation and submission of all NRG Oncology publications, gathering required conflict of interest disclosures, distributing publications for to all co-authors and Publications Committee Chair and Vice Chair for review, and for ensuring that NRG Oncology complies with the NCTN Program Guidelines and the terms of its grant award from the NCI.

NRG Oncology Statistics and Data Management Center (SDMC) – The SDMC works collaboratively with the protocol PI and other investigators to ensure data quality and to provide data analyses of study endpoints and approved ancillary projects.

IV. Timelines

The submission of all abstracts, manuscripts, and presentations that utilize NRG Oncology data or resources will follow these timelines. The Publications Department Staff will work with the responsible first author and statistician (when appropriate) to develop a publication timetable for each study/project analysis. The timetable will be conveyed in writing to the first author, primary committee chair, and other appropriate leadership.

Primary Endpoint Reporting – NCI Guidelines require that results of primary endpoints of NRG Oncology trials be presented at scientific meetings within six to eight months of completion of a study analysis (if not sooner, based on the relevance of the results). (See: NCI Terms/Conditions of Award document, pg. 38, [National Cancer Institute National Clinical Trials Network Program Guidelines](#)).

The first and senior authors will convene a manuscript preparation call prior to or within 60 days of submission of an abstract to a national/international conference. This is to ensure that the first manuscript draft will be provided to the Publications Department within 30 days after the initial national/international conference presentation. (See Section III.3.E)

If the manuscript draft has not been received in the Publications Department by within 60 days of abstract presentation, the first author will be contacted for an explanation, and the Publications Committee Chair and Vice Chairs will **consider re-assigning** the first author responsibilities.

The manuscript should be submitted for publication in the peer-reviewed literature (not as an abstract) within one year of the availability of the primary study results based on the completion date of the study recorded in the U.S. National Library of Medicine database, [ClinicalTrials.gov](#).

NCI and Corporate Collaborators Review – All manuscripts, abstracts, and presentations reporting results of NCI-sponsored trials must be submitted to NCI in advance for review and in the case of trials using agent(s) supplied under CTEP Collaborative Agreements (e.g., CRADA, CTA, or CSA) to industry partners for potential comments. The Publications Department Staff is responsible for submitting all publications to NCI and collaborators, including:

1. **Manuscripts** – The Publications Department Staff must submit manuscripts to the NCI and corporate collaborators as defined by contract (at least 30 days) in advance of submission for publication. Collaborators may request an additional 30 days to ensure that confidential and proprietary data, in addition to the intellectual property rights of the collaborator(s), are protected. Manuscripts will not be submitted to a journal without this review.
2. **Abstracts** – The first author must submit a final draft to the responsible statistician, if one is assigned, or to the Publications Department Staff at least two weeks before the society/conference submission deadline. The Publications Department Staff will submit the approved abstract to the NCI at least three days prior to the submission deadline. In addition, the NCI pharmaceutical/biotechnology collaborator(s) will have an opportunity for a required courtesy review (at least three days) of any abstracts as defined by contract prior to submission.
3. **Presentations** – The first author must submit a final draft of the presentation using the NRG Oncology presentation template available on the website to the responsible statistician, if one is assigned, or to the Publications Department Staff two weeks before the society/conference submission deadline. The Publications Department Staff will submit the approved presentation to the NCI at least three days prior to the submission deadline. In addition, the NCI pharmaceutical/biotechnology collaborator(s) will have an opportunity for a required courtesy review (at least three days) of any presentations as defined per contract prior to submission.

NRG Oncology Publications Guidelines

I. General Considerations

NRG Oncology must be cited within all abstracts, presentations, and manuscripts, preferably in the title if the journal or conference association permits; all applicable federal grant numbers must be cited on the manuscript/abstract, along with the [ClinicalTrials.gov](https://clinicaltrials.gov) registration number for the trial.

1. The Publications Department Staff prepare a written timeline after receipt of the submission Checklist for each publication, in consultation with the first author and the responsible statistician, when appropriate, and update the timeline as the publication develops. The primary committee chair should be notified of the timeline.
2. The selection of an appropriate journal for submission is determined by agreement of the first author, in consultation with co-authors, the primary committee chair, and the Publications Department.
3. Co-authors must review and comment on the abstract/manuscript prior to submission to a conference or to a journal. Co-author reviews of manuscripts are due within two weeks. Failure to respond to three documented communications will result in removal from the author line (see Exhibit 1, for example of third notice).
4. All NRG Oncology abstracts/manuscripts must be approved by the Publications Committee Chair or Vice Chair prior to submission to a conference or journal.
5. The NRG Oncology Publications Department is the clearinghouse for all NRG Oncology abstracts/manuscripts submitted to a society/conference or journal for presentation/publication. This permits NRG Oncology to maintain a complete, accurate, and up-to-date bibliography within the Publications Department.
6. **Special Considerations for the Development of Manuscripts Reporting Primary Endpoints** – Section III.3.D details the first author's responsibility to convene a manuscript preparation call and to initiate the Manuscript Discussion Planning Form (MS Planning Form).
7. For complex situations such as when a protocol or project is developed with input from two committees or organizations, authorship agreements are highly encouraged, preferably at the inception of the study. These agreements must be approved by the Protocol and Publication Committees, and should be reviewed on a regular basis during the life of the study to ensure that they are still appropriate. (See Exhibit 2, for example of authorship agreement). A copy of the original authorship agreement and all subsequent changes must be submitted to the NRG Oncology Publications Department for filing with the study's publication records. **In the rare instance when there is disagreement concerning author line inclusion and/or placement, the Publication Committee Chair and/or Vice Chairs will adjudicate the disagreement. Appeals to that decision may be made in writing to the Deputy Group Chair for Publications and Communications.**

II. Author Line Determinations

NRG Oncology believes strongly in providing authorship opportunities for investigators who contribute substantially to the scientific development and/or conduct of the study/project, the data analysis, and the writing and review of an abstract/manuscript, as well as those who provide scientific data (patient accrual, clinical data, and biological material submission). All authors must contribute to the development, writing, and review of the abstract, presentation, and/or manuscript. See: [National Cancer Institute National Clinical Trials Network Program Guidelines](#) and ICMJE [Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals](#).

The Publications Committee Chair or Vice Chairs determines and approves the authorship line in close collaboration with the first author, statistician, and in discussion with the co-authors and primary committee chair as appropriate, based on the requirements below. Some flexibility relative to authorship is allowed, based on discussion among the authors and the Chair or Vice Chair. In general, requests for additions or changes to authorship lines that differ from those outlined in the guidelines below that are well-justified and **recommended by the first or last author and/or the relevant committee chair** must be accepted and approved by the Publications Committee Chair or Vice Chair. If necessary, written appeals will be adjudicated in writing by the Deputy Group Chair for Publications and Communication.

1. General Considerations

- A. The total number of authors is subject to meeting/journal policies.
- B. The NRG Oncology Publications-approved authorship line is final and must be used for submission.
- C. Unless otherwise approved by NRG Oncology Publications, manuscripts will use the author byline determined for the corresponding abstract. The manuscript may also include additional authors who meet ICMJE criteria but could not be included in the abstract due to conference limits on number of authors.. For example, journal articles may allow more authors than abstract presentations or it may be agreed in advance that the first, last, or other author position will be rotated among authors for abstract and manuscript.
- D. Authorship determinations should begin at the initiation of the study, with modifications as needed. **Any authorship position, including the first author, may be reassigned upon recommendation of the NRG Oncology Publications Committee Chair or Vice Chair with concurrence of the Deputy Chair for Publications and Communications, in consultation with the primary committee chair if the original author does not complete their responsibilities according to the agreed-upon timeline.**
- E. Authorship for an individual is granted only for the per-protocol endpoints or specific ancillary analysis in which they are involved and have Publications Committee approval. No author is granted authorship in perpetuity for work beyond that stated above. NCTN groups are, by definition, and by NCI mandate, data-sharing entities. Once published, NRG Oncology data will become available to the public at large, and individuals hold no exclusive publication rights beyond those stated above. This holds for biomarker or imaging data conducted in individual laboratories and used in NRG Oncology publications. In the case of the latter, NRG Oncology Publications will make reasonable attempts to recognize the original laboratory principal investigator from whom the marker data originated, within the acknowledgements. At times, studies with collaborators from outside entities will require study-specific guidelines that must be documented and filed with the Publications Committee.

2. Authorship Determination and Order for NRG Oncology Protocol-specified Analyses

- A. Authorship Determination for the Primary Publication, which will Contain the Protocol-Specified Primary Endpoint(s) with or without Protocol-specified Secondary/Exploratory Endpoint(s)
Authorship order will generally be as listed below (**See Appendix A for chart of authorship positions**):
 - i. First Author
 - (1) The protocol principal investigator/study chair (PI) is expected to be the first author on the initial reporting of the primary endpoint. The study PI may not delegate this authorship position without permission from the primary committee chair and with

approval from the Publications Committee. In special circumstances two investigators may share the first authorship role with the approval of the protocol principal investigator, the responsible committee chair, the NRG Oncology Publications Committee Chair or Vice Chair, and if appropriate, the study statistician. Approval for co-first authors must be obtained prior to submission of the first draft to the Publications Department. Ideally it will be documented in an authorship agreement at the start of the study and on the MS Planning Form.

- (2) For secondary/exploratory endpoints, the first author may be the appropriate study co-investigator/co-chair. This first author position should not be delegated without permission from the primary committee chair and approval from the Publications Committee.

ii. Co-authors

(1) *NRG Oncology Statisticians*

- a) The primary study statistician will be listed as second author on protocol-specified analyses, unless special circumstances warrant a different placement and the study statistician agrees to the change.
- b) When appropriate, additional statisticians may be recommended for authorship.

(2) *Study Co-Investigators/Co-Chairs*

- (a) Co-chairs who appropriately contributed to the abstract/manuscript may be listed as co-authors. For example, if a separate Quality of Life (QOL) or Translational Science (TS) publication is planned, the QOL or TS co-chairs may not be included on the authorship line for the primary clinical paper if no QOL or Translational work was cited in the abstract/manuscript.
- (b) If a study co-chair leaves an NRG Oncology institution, he/she maintains authorship rights with the permission of the group chairs and the Publications Committee, provided that they continue to fulfill their co-author responsibilities, which include continued support of the study.

(3) *Protocol Officer (when applicable)*

(4) *Accrual Authors*

Effort will be made to maximize the number of investigators offered authorship based on accrual contributions. The number of accrual co-authors is determined by the Publications Department Staff in close consultation with the first author, statistician, and primary committee chair, subject to final approval by the Publications Committee Chair or Vice Chair and may be limited by the requirements of the conference or journal. Authorship based on accrual will be granted to the main member networks that enrolled the largest number of patients to a study. All authors listed on the abstract, manuscript, or presentation should have contributed substantially to the study design or its implementation, including data acquisition, accrual, or analysis and interpretation. All authors must have been involved in the writing/editing of the publication at draft stages and have read and approved the final version.

- (a) In general, the parent institution (main member, Lead Academic Participating Site (LAPS) or /NCORP member, hereafter referred to as the main member) and all affiliates/components (hereafter referred to as affiliates) are treated as an aggregate (main member network) and the determination of the institutional author will be made by its contact PI in consultation with their local affiliate NRG Oncology PIs.
- (b) It is recommended that the main member contact PI will award accrual authorship to the highest enrolling institution among its main member network.
- (c) If the institution is already represented among the authors (e.g., protocol PI), it may still be granted another authorship slot in the instance of significant institutional accrual.

- (d) Accrual numbers are based on the patient cohort used in the paper. For example, a publication on QOL endpoints will use accrual based on patients enrolled to the QOL portion of the study. Accrual for TS research analyses will be based on specimen submission.
 - (e) Authorship representation for accrual rests with the parent institution. The accruing institution's PI designates the representative author for that institution. When an accrual representative leaves the institution, the institutional PI has authority to assign a different author for that institution.
 - (i) The NRG Oncology institutional PI may allow the previously designated co-author to retain his/her authorship rights, but this co-author must list their affiliation as the institution where the data was collected/patients treated; if the journal/meeting allows co-authors to list multiple affiliations, the co-author may also list their current institution following their previous institution affiliation (i.e., "Thomas Jefferson University Hospital [during trial], Mayo Clinic [current]").
 - (ii) The NRG Oncology institutional PI may elect another investigator currently at their institution to replace the previous representative, preferably one who also participated in the trial but did not receive authorship credit.
 - (iii) NRG Oncology institutional PIs may elect themselves as the accrual authorship representative to represent the entire institution's efforts on the trial.
 - (iv) If a member institution's accrual represents 10% or more of the total for the study, the institution PI may designate an additional author from that member site.
 - (v) For trials with fewer than 50 patients, efforts will be made to recognize as many institutions as possible.
 - (f) Accrual authorship will be awarded if the institution maintains satisfactory data quality, timeliness, and audit performance.
- (5) *Group Leadership*
If a Group Chair, NCORP PI, Deputy Group Chair, or other group leader has made a substantial scientific contribution to the development, conduct, and/or analysis of a study, their name(s) may be included in the authorship line as determined by the Publications Committee Chair or Vice Chair. Authorship is not granted for general oversight or solely for obtaining funding.
- (6) *Other co-authors*
The first and/or last author may initiate a request to the Publications Committee Chair (or designated Vice Chair) and the Deputy Chair for Publications and Communications to add additional contributors to the authorship line. Written justification must be provided for such requests.
- (7) *Last Author (to be listed last)*
The primary committee chair or vice chair at the time of study activation holds the right to last authorship, subject to fulfilling their responsibility to have substantial scientific participation in the development, conduct, and/or analysis of the study. If a committee has not only a chair but also vice chairs, only one may be designated for the last authorship position unless the other is one of the protocol co-chairs and thus will be designated as described above. The primary committee chair and vice chairs should decide *a priori* upon study initiation who will hold the last author designation. If the primary committee chair is the first author of the study, they may recommend to the Publication Committee to name as last author a study co-chair, Group Chair or NCORP PI who may have been directly involved and made a substantial scientific contribution to the development, conduct, and analysis of the study (as described

below)). For protocols whose development required very active and robust contributions from more than one committee, a pre-agreement should be created in order to share the recognition commensurate with the effort and intellectual input. It is strongly recommended that this be considered as part of the authorship agreement at the inception or during the early phase of the conduct of a trial.

(8) Other authorship considerations

- i. The names of deceased researchers may be included in the acknowledgements, because deceased persons cannot fulfill the responsibilities of authorship. Failure of retired investigators to respond to three documented communications will result in removal from the author line (see Exhibit 1, for example of third notice).
- ii. In special circumstances, there may be co-first authors or co-last authors; i.e., the study was co-developed by two lead protocol organizations or research bases and the study has co-principal investigators. If co-authorships are being considered, the involved parties should develop an authorship agreement for approval by the Publications Committee prior to the development of the abstract/manuscript. This agreement should outline the authorship order and designations of the involved parties for submissions to conferences/journals for which co-authorship is allowed as well as for submissions for which it is not allowed. For complex situations, authorship agreements are highly encouraged in advance, preferably at the inception of the study (see Exhibit 2, for example of authorship agreement).
- iii. Joint publications, including white papers/atlasses, with research societies or groups, and/or endorsement of publications, including white papers/atlasses, must follow the approval process found in Section IV.1-3.

B. Authorship Order for Protocol-specified Secondary/Exploratory Endpoints

- i. The order of authorship should generally be as follows: First author, primary NRG Oncology statistician, applicable co-chairs, accrual authors, last author. Under rare circumstances, there may be co-first authors or co-last authors; e.g., on an external grant-funded study with co-PIs or conjoint analyses that involved multiple supervising committee chairs or required co-development of a study. In these cases, the authorship order should be determined based on the relative scientific and methodologic contributions to the development, conduct, and/or analysis of the study; however, all such requests must be initiated by the co-PIs with justification. For this situation, authorship agreements are highly encouraged, preferably at the inception of the study (see Exhibit 2, for example of authorship agreement). If co-authorships are being considered (e.g., co-first or co-last), the involved parties should develop an authorship agreement for approval by the Publication Committee prior to the development of the abstract/manuscript. This agreement should outline the authorship order and designations of the parties involved for submissions to conferences/journals for which co-authorship is allowed as well as for submissions for which it is not allowed.
- ii. Additional authors, if applicable, will be listed between the accrual authors and the last author.
- iii. The PI who relinquished their right to be the first author will be listed as a co-author in a slot recommended by the new first author and their co-authors, with approval by the Publications Committee.

For complex situations, authorship agreements are highly encouraged, preferably at the inception of the study. These agreements must be approved by the Protocol Committee and should be reviewed on a regular basis during the life of the study to ensure that they are still appropriate. (See Exhibit 2, for example of authorship agreement).

- C. Authorship Order for Patient Reported Outcomes (PRO)/Quality-of-Life (QOL)/Comparative Effectiveness (CE) Protocol Analyses
- i. The order of authorship should generally be as follows: First Author (i.e., PRO/QOL/CE protocol investigator), primary NRG Oncology statistician, other PRO/QOL/CE research investigators who are critical to the development and conduct of the study, clinical study PI, accrual authors (based on PRO/QOL/CE submission), PRO/QOL/CE vice chair, committee chair, last author (generally the PRO/QOL/CE committee chair or vice chair).
 - ii. For complex situations, authorship agreements are highly encouraged, preferably at the inception of the study. These agreements must be approved by the Protocol Committee and should be reviewed on a regular basis during the life of the study to ensure that they are still appropriate. (See Exhibit 2, for example of authorship agreement).

3. Authorship Determination and Order for NRG Oncology Non-protocol-specified Analyses (Ancillary Analyses)

- A. Authorship Determination for Ancillary analyses of clinical data and biological material will mirror the clinical authorship guidelines for protocol-specified endpoints, incorporating the unique realities of team-based basic, physics, pathology, imaging, patient-reported outcomes, and TS research. Authorship will be predicated on the degree of contribution to the overall effort, the sum of the scientific effort and acquisition of relevant biorepository specimens, images, digital data, and the biostatistical/ bioinformatics work required for proper analysis of resultant data. Prospective authors should be identified in advance at the time of the TS secondary analysis or ancillary application, when possible, with justification of authors made to the Publications Department and Committee. (See Exhibit 2, for example of authorship agreement).

i. Authors

First author is the investigator who requested the analysis and who led the specific effort. They will assess the relative contributions of all putative co-authors, in consultation with the primary committee chair/vice chair (e.g., TS Chair, Medical Physics Chair, Pathology Chair, PCOR Chair, etc.), and site-specific liaison if there is one (e.g., TS liaison).

Team science can involve contributions from many investigators with roughly equivalent degrees of effort. In such cases, the first author may recommend, for Publications Chair (or Vice Chair) approval, including all of them, journal permitting. It is the responsibility of the first author to verify and to assume responsibility for the integrity and accuracy of the data, inclusive of the clinical, translational, and basic science components.

ii. Co-authors may include:

- (1) NRG Oncology statistician(s) involved in performing the ancillary analysis.
Depending on the approved project and the intellectual input, a statistician from outside of NRG Oncology may be the primary statistician.
- (2) Additional investigators substantially involved in the development of the ancillary analysis proposal
- (3) PIs of all studies included in the ancillary analysis, as space allows, listed alphabetically
- (4) Accrual authors -- when possible and applicable
- (5) Committee chair and Group Leadership
- (6) Other co-authors related to team science, which may include trainees/students, NRG Biobank personnel who made significant contributions to biospecimen selection, processing, and/or data generation, and others who have made significant contributions to the generation of the data.

B. Order of Authorship (See Appendices B - E for charts of author positions for non-protocol-specified analyses)

- i. Ancillary analysis authorship lines will be identified as follows: First author, NRG Oncology statistician (if the NRG Oncology statistician conducts the analysis), additional requesting investigators, other co-authors (if applicable), protocol PIs of studies used in analysis, accrual authors, second statistician (if applicable), last author (generally the primary committee chair at the time of approval of the ancillary analysis). If the primary committee chair was involved in the ancillary data application and managed the majority of the study accrual or research work, they have the right to retain last authorship. See Appendix B.
- ii. TS analysis authorship lines will be identified as follows: First author, NRG Oncology statistician (if the NRG Oncology statistician conducted the analysis or an external statistician if approved for the project), or other statistician (if that statistician conducted the analysis), other TS investigators who are critical to the development and conduct of the study (e.g., students or laboratory personnel who made significant scientific contributions), clinical study PI (if appropriate), accrual authors (based on specimen submission), second statistician (if applicable, who, on occasion, may be the NRG Oncology statistician who reviews the plan of analysis but does not conduct the analysis), committee chair who co-developed the translational plan, current responsible committee chair if managing major accrual or research work, protocol TS/Correlative Biology Co-chair (if different from PI), second- to-last author (generally either the TS Committee vice chair of the Disease Site or other appropriate NRG Oncology Committee vice chair), and last author (generally the laboratory or grant-holding PI). When appropriate, the NRG biospecimen bank investigator responsible for selection and characterization of biospecimens required for the TS project should be included, if their contributions are beyond those of standard banking responsibilities (e.g. no authorship credit for performing standard QA/QI functions required for proper bank performance). See Appendix C.
- iii. Physics/dosimetry-based ancillary analysis authorship lines will generally follow the order of authorship for other types of ancillary analyses: First author, NRG Oncology statistician (if NRG Oncology statistician conducted the analysis) or other statistician (if that statistician conducted the analysis), other physics investigators critical to the development and conduct of the study (e.g. students or laboratory personnel who made significant scientific contributions), clinical study, clinical study PI (if appropriate), accrual authors (based on data submission), second statistician (if applicable who, on occasion, may be the NRG Oncology statistician who reviews the plan of analysis but does not conduct the analysis), committee chair who co-developed the physics section of the study, current disease site committee chair if managing major accrual or research work, protocol Physics Co-chair (if different from PI), second-to-last author (committee chair at the time of study activation), and last author (generally, the physics study co-chair). See Appendix D.
- iv. PRO/QOL/CE ancillary analysis authorship lines will be identified as follows: First author, NRG Oncology statistician (if the NRG Oncology statistician conducts the analysis or an external statistician if approved for the project), other statistician conducting analysis if not NRG Oncology statistician, other PRO/QOL/CE research investigators who are critical to the development and conduct of the study, clinical study PI (if appropriate), accrual authors (based on PRO/QOL/CE submission), second statistician if appropriate, committee chair at the time of study activation, protocol PRO/QOL/CE co-chair if different from the first author), last author (the PRO/QOL/CE committee chair). See Appendix E.
- v. Methodology analyses focused on physics/dosimetry, statistical methods, other (including but not limited to process-related, economics, and comparative effectiveness studies):

- (1) The first author may submit a written statement with suggested authors, including the justification for each author's inclusion.
- (2) NRG Oncology Publications Committee will approve the author line based on the primary focus of the paper and will include as many authors as are feasible and appropriate.

4. Intergroup Studies When NRG Oncology is the Lead Protocol Organization

Studies with co-chairs representing other NCI-lead Protocol Organizations (LPOs) will have their study co-chairs listed as co-authors. Additional co-author slots will be awarded to individual institutions according to the accrual author requirements listed above.

5. Intergroup Study Champions

Authorship for champions representing other NCI-lead Protocol Organizations (previously called "Co-Chairs" for the other LPO groups) should be on essentially the same basis as for anyone else. Champions need to be listed on the face sheet of the protocol representing a particular collaborating LPO group AND must have made significant scientific/intellectual contributions to the development and progress of the trial, AND meet the requirements outlined by the [ICMJE Stipulations for Authorship](#).

III. Publication Process

All publications must be approved by the Publications Committee through its designee(s) according to the processes listed below.

1. Abstracts

- A. Prior to submission of an abstract to a conference, the following procedures should be followed:
 - i. The Publications Department must be notified at least six weeks prior to the submission deadline that an abstract submission is planned. (NRG-Publications@NRGOncology.org). If the trial was released by the NRG Oncology Data Monitoring Committee based on an interim analysis the six-week notification requirement may be shortened.
 - ii. Abstracts based on an approved Ancillary Project Committee or NCTN Core Correlative Sciences Committee application must be submitted with a copy of the approved application and the approval letter. Documentation of IRB approval may be required before the abstract will be approved.
 - iii. The Publications Department Staff will work with the first author and statistician (if one is assigned) to develop the abstract Checklist and the author line for the proposed abstract.
 - iv. The first author and the NRG Oncology statistician (if one is assigned) develop the abstract.
 - v. The first author circulates the draft abstract to the Publications Committee-approved co-authors who were provided by the Publications Department Staff for review.
 - vi. The first author incorporates co-author comments into the draft abstract and sends the updated draft to the NRG Oncology statistician at least two weeks prior to the conference submission deadline. The NRG Oncology statistician reviews the draft and then sends it to the Publications Department. If there is no NRG Oncology statistician the first author submits the draft abstract to the Publications Department at least two weeks prior to the conference submission deadline.

- vii. The Publications Department Staff reviews the draft abstract for adherence to the provided author line and to assure proper acknowledgement of federal grants and/or industry support. The Publications Department Staff then submits the draft to the Publications Committee Chair or Vice Chair for approval and the NRG Oncology Deputy and Group Chairs for informational purposes.
 - viii. The first author and Publications Department Staff will work together to obtain any required signed conflict of interest author forms.
 - ix. The Publications Chair or Vice Chair and/or the Group Chair(s) may, at their discretion, ask that the abstract be reviewed by an individual other than those listed above.
 - x. The approved draft abstract will be sent for review to the NCI, as required by the appropriate NRG Oncology grant, and any pharmaceutical/biotechnology collaborator(s) at least three days prior to the submission deadline, or as required by contract.
 - xi. Reviewers' comments must be returned as tracked changes to the first author, the statistician, and the Publications Department. The first author will be responsible for addressing the various edits/comments prior to submission. The first author will provide the final abstract to the Publications Department.
 - xii. Once the draft abstract has completed this approval process the Publications Department Staff sends the final approved abstract to the first author for submission to the conference.
 - xiii. For abstracts approved for conference submission, the first author will notify the Publications Department of its submission, then the Publications Department Staff will notify the co-authors and the Publications Committee and group leadership.
- B. The first author must notify Publications Department Staff and NRG Oncology statistician immediately of acceptance or rejection of the abstract.

2. Presentations

- A. All NRG Oncology presentations should use the appropriate NRG presentation template, which is available on the [NRG Oncology Resources](#) page, even if the conference has its own template.
- i. For presentations with NRG SDMC statistical support, the first author, in collaboration with the statistician, will draft the presentation and submit it to the Publications Department. The primary committee chair should be notified at this time.
 - ii. The first author will ensure that a draft of the presentation is distributed to all co-authors and that their suggested edits and approval are obtained.
 - iii. The final presentation, as approved by the co-authors, should be submitted to the NRG Oncology Publications Department by the statistician at least 10 days before the first day of the meeting or the conference submission deadline if that is earlier.
 - iv. The NRG Publications Department Staff circulates the presentation for review to NRG Oncology Publications Chair or Vice Chair, and appropriate NRG Group Deputy Chair, Group Chairs, and Primary Committee Chairs.
 - v. The Publications Department Staff will simultaneously distribute the presentation for review to appropriate commercial entities providing study support, and to CTEP/NCI to comply with grant requirements.

3. Manuscripts

- A. **NRG Oncology is required to comply with the 2024 NIH Public Access Policy as implemented on July 1, 2025, which requires that NIH-funded articles are freely available to the public upon the official date of acceptance for publication. NRG Oncology is required by the terms of its grant awards to provide acknowledgement of NCI funding by listing the appropriate grants on the title page and including following disclaimers:**

2024 NIH Public Access Policy: *“This manuscript is the result of funding in whole or in part by the National Institutes of Health (NIH). It is subject to the NIH Public Access Policy. Through acceptance of this federal funding, NIH has been given a right to make this manuscript publicly available in PubMed Central upon the Official Date of Publication, as defined by NIH.”*

Funding: *“Research reported in this publication was supported by the National Cancer Institute of the National Institutes of Health under Award Number U10CA180868 (NRG Oncology Operations). The content is solely the responsibility of the authors and does not necessarily represent the official views of the National Institutes of Health.”*

[Note: Publications staff will work with the first author to add additional grants as appropriate].

See section IV.1 for additional guidance on requirements for White/Review Papers and Atlases.

- B. First authors wishing to submit to high-impact journals should use the journal’s pre-submission inquiry process, if available.
- C. All manuscripts using NRG Oncology data (clinical, imaging, or biospecimen) must have author lines determined as specified in Section II. All manuscripts must be approved by the Publications Committee according to the process listed below.
- D. It is the responsibility of the first author and the assigned statistician to notify the Publications Department when manuscript preparation begins (NRG-Publications@NRGOncology.org). The primary committee chair should also be notified. For manuscripts with NRG Oncology statistical support, the first author will draft the manuscript in concert with the statistician. They, along with others who have had early input, will prepare a document complete enough to be reviewed by the co-authors for scientific accuracy and will send this to the Publications Department. If there was not a previous abstract presentation for this publication, the NRG Oncology statistician will send the Publications Department a Checklist and accruals prior to work beginning on the manuscript. If there is no NRG Oncology statistical support, the first author provides this first draft to the Publications Department.
- E. Authors are prohibited from “preprinting” or depositing non-final versions of manuscripts into institutional or other types of non-peer reviewed repositories (i.e., “green” open access repositories”) without the permission of the Publications Committee.
- F. **Development of Manuscripts Reporting Primary Endpoints** – To ensure timely publication of primary endpoint results, the first author is required to convene a Manuscript Planning Call and to initiate the Manuscript Development Discussion Planning Form (MS Planning Form) (see Appendix F) as detailed below.
 - i. Publications Department Staff will send the MS Planning Form template to the first author upon notification that the abstract has been approved for submission to a conference. The MS Planning Form template is available on the website or by contacting the Publications Department (NRG-Publications@nrgoncology.org).
 - ii. The first author of all primary endpoint abstracts is to convene the Manuscript Planning Call prior to, or within sixty days after abstract submission to a scientific conference. Publications staff will notify the responsible committee chair and the Publications Committee chairs if the call has not been scheduled within the required timeline.
 - iii. The first author is to invite the study statistician, the responsible committee chair(s) (i.e., Disease Site or NCORP Chair) as well as any other study team member who the first author and responsible committee chair believe should be involved in the planning process for the manuscript reporting the study’s primary endpoint(s).

- iv. The MS Planning Form will be completed by the first author in order to document the results of the call. The completed Form must then be sent by the first author to NRG Publications Staff at the conclusion of the Planning Call.
 - v. The study statistician will notify Publications Staff when they send the first author the study results report that will enable the first author to begin development of the manuscript.
 - vi. Publications Staff will monitor the progress of the developing manuscript and will notify Publications leadership and the responsible committee chair if the MS Planning Form is not received within 60 days of the abstract submission or if the first draft is not received as agreed upon on the Form.
 - vii. Publications Staff will then send the publications timeline to the first author, statistician, corresponding author, and other authors as applicable. The first /corresponding author will be required to acknowledge receipt and understanding of the timeline by return email receipt and/or DocuSign.
- G. The first author (if there is no NRG statistical support) or NRG Oncology statistician sends manuscript that is ready for review to Publications Department Staff at NRG-Publications@NRGOncology.org
- H. Manuscripts based on an approved Ancillary Project Committee or an NCTN Core Correlative Sciences Committee application must be submitted with a copy of the approved application and the approval letter. Documentation of IRB approval may be required before the manuscript will be approved.
- I. Publications Department Staff circulates the manuscript to the Publications Committee approved co-authors for review and collects required disclosure forms.
- i. The co-authors' comments must be returned to the Publications Department within 14 days. The collated reviewer comments are sent to the first author, who is responsible for working with the co-authors and NRG Oncology statistician (if applicable) to incorporate the comments/edits provided by the co-authors.
- J. The final draft manuscript is sent to Publications Department Staff by the NRG statistician, if involved, or directly by the first author if there is no NRG statistician to the Publications Department Staff, which will then send it for review by the NCI and Pharma sponsors, as applicable.
- i. Publications Committee Chair or Vice Chair will review the manuscript (1-week turnaround) before the manuscript is distributed to NCI and applicable Pharma collaborators.
 - ii. The Publications Chair or Vice Chair and/or the Group Chair(s) may, at their discretion, ask that the manuscript be reviewed by an individual not directly listed herein.
 - iii. If comments are received from any of these reviews, they are sent to the first author and statistician for consideration.
- J. The Publications Department Staff will ensure that the final version of the manuscript is formatted for the intended journal and will submit the manuscript on behalf of the first author and notify all co-authors of submission.
- i. Publications Staff will prepare a listing of the institutions that enrolled patients in the reported study(ies). This institutional listing "Acknowledgement" will be submitted with the manuscript according to the journal's specifications. For manuscripts reporting primary endpoint results Publications Staff may also include a "Collaborating Authors" group on the author line consisting of representatives of additional high accruing institutions. Collaborating Authors will be included according to journal specifications.
 - ii. NOTE: NRG Oncology does not pay journals' article processing charges (APC) or open access fees. If funds are required for color graphics the first author may seek NRG support on a case-by-case basis.

- K. Once the manuscript has been submitted, the first author should inform the Publications Department Staff of any communications received from the journal. The first author, the NRG statistician (if applicable), and the Publications Department Staff will work together to answer and resolve any comments.
- L. The first author is responsible for communicating with the Publications Department and the NRG statistician (if applicable), information regarding final submission requirements, acceptance, and proofs. The statistician should be involved in the review of all proofs to avoid mistakes and misinterpretations of study data.
- M. Predatory Journals**
 - i. Predatory journals are open-access journals that use exploitative practices including charging fees for publication as well as low or no quality control or peer-review.
 - ii. NRG Oncology does not support publication of manuscripts in what have been termed “predatory journals.”
 - iii. Journals must be indexed with NIH/PubMed. Check [PubMed Search Engine](#).
 - iv. If the journal for publication is not listed in PubMed, is not familiar to the author planning to submit there, or seems questionable in any way, please contact the Publication Department for approval.
 - v. See the [NRG Oncology Publications](#) page and go to [here](#) for additional information on predatory journals.
- N. Resubmissions**
 - i. Resubmissions for manuscripts rejected following a second submission:
 - (1) For per-protocol endpoint manuscripts, the journal reviews will be sent to the primary committee chair(s) for discussion with the first author regarding strategic edits and resubmission by NRG Oncology Publications Staff.
 - (2) For ancillary studies, NRG Oncology Publications will assist up to a third rejection. Resubmission following a third rejection is the responsibility of the first author. The first author must inform the Publications Department to which journal they intend to submit the manuscript and must receive approval of that journal prior to submission of the manuscript. The first author must keep the Publications Department informed of the status of the submission, its acceptance, and its publication.
 - (3) Please review (Predatory Journals, section iii) above, on PubMed-indexed journals.
- O. NIHMS (National Institute of Health Manuscript Submission System) Compliance**
 - i. The final requirement for an NRG manuscript is the National Cancer Institute (NCI)-mandated submission of the manuscript into the NIHMS/PubMed Central database. This step occurs after the journal accepted version is made available via the Public Access process (see Section III.3.A, Publication Process).
 - ii. ***This is a Two-step process and is the responsibility of the first author.***
 - iii. Details on the process can be found on the NRG Oncology website at: [Methods for Complying with the required manuscript NIH Public Access Policy](#). Note that Public Access does not require an Open Access submission.

IV. White/Review Papers and Atlases

1. When NRG Oncology investigators wish to publish a white or summary review paper or an atlas that is associated with NRG Oncology research and/or procedures, the manuscript must have approval of the responsible primary committee (disease site, scientific, administrative or NCORP committee) and must be sent to NRG Oncology Publications for review, processing and final approval by the Publication Committee Chair/Vice Chair and Group Chairs. All white/review papers and atlases must contain the 2024 NIH Public Access Policy and the funding language as shown in Section III,3.A and the following White Paper or Atlas Disclaimer language, as appropriate.

2. Atlas Disclaimer:

“These contouring and treatment plans were developed to ensure consistency in the treatment of patients enrolled on NRG clinical trials and represents a consensus of the authors regarding their view of the optimal approaches in that setting. The use of this atlas should not be interpreted as generalized treatment guidelines and cannot guarantee any specific outcome. Potential broader applicability requires additional appropriate validation that is beyond NRG Oncology’s mission. The actual contours and clinical decision-making is dependent on physician judgement. The information contained herein is subject to periodic revision as necessary because of the advancement of medical knowledge, technology, and practices.”

3. White Paper Disclaimer:

“This white paper was developed to ensure consistency in the diagnosis and treatment of patients enrolled on NRG clinical trials and represents a consensus of the authors regarding their view of the optimal approaches in that setting. The ideas presented in this paper should not be interpreted as generalized treatment guidelines and cannot guarantee any specific outcome. Potential broader applicability requires additional appropriate validation that is beyond NRG Oncology’s mission. Diagnosis and treatment decision-making is dependent on physician judgement. The information contained herein is subject to periodic revision as necessary because of the advancement of medical knowledge, technology, and practices.”

IV. Data Sharing

1. Requests for use of NRG data are governed by the [NRG Oncology Data Sharing Policy](#) as posted on the NRG website.
2. Acknowledgment of NRG Oncology, NRG Oncology grants, and any industry grants that supported the research for which results are being published, is required on all publications.

V. Publication of Institution-Specific Results

1. After publication of a primary manuscript by NRG Oncology, an individual institution may publish data related to a site-specific study conducted in connection with the protocol; such publications must be sent to the NRG Oncology Publications Committee for review and comment at least 30 days before submission for publication.

VI. Archiving of NRG Oncology Publications

1. Copies of all published manuscripts, abstracts, non-peer reviewed journal articles, book chapters, editorials, invited correspondence for journals, conference proceedings, and brief communications, must be sent upon publication to the Publications Department Staff.
2. All such articles will be entered into the NRG Oncology publications database and copies of the articles retained at the Publications Department.
3. A list of recent NRG Oncology publications will be available on the NRG website.

VII. Exhibits

1. Third and Final Notice to Author Example

“You are receiving a third and final request to fulfill your necessary obligations as a listed co-author on the abstract/manuscript referenced below. At this time, your co-authors and NRG Oncology are about to submit this abstract/manuscript for publication and need an immediate response from you, fulfilling your authorship obligations within 5 business days of the date on this correspondence. A

lack of timely response from you will constitute acceptance of removal from the author line. We are looking forward to an immediate response from you.”


2. Authorship Agreement Example

Agreement for Future Publications for NRG-XX0XX Secondary Analyses, [Dated]

- EORTC QOL – **[Investigator A]** will be first author and will write the manuscript, and the last author is PCOR chair **[PCOR Chair]**. Per their prior agreement **[Committee Chair 1]** as the committee chair at activation and **[Committee Chair 2]** as the committee chair managing the data analysis and publication process are contributors, in that order.
- Long Term Endpoints Update – **[Investigator C]** will be first author and will write the manuscript. Because this is a clinical update project, the last author will be the committee chair **[Committee Chair 2]**, who will supervise these new data analyses. Per prior agreement **[Committee Chair 1]**, as committee chair at activation, is a contributor.
- PRO-CTCAE – **[Investigator A]** will be first author and will write the manuscript, and the last author with special expertise in PRO-CTCAE will be **[Investigator D]**. Per their prior agreement **[Committee Chair 1]**, as the committee chair at activation and **[Committee Chair 2]**, as the committee chair managing the data analysis and publication process are contributors, in that order. In addition, **[PCOR Chair]**, as PCOR chair, will be a contributor.

All the authors named herein have agreed to this authorship arrangement.

Approved by NRG Oncology Group Chairs on October 29, 2025.

DocuSigned by:

 AED9B6885EFC40A...
 Sharon Hartson Stine
 Executive Director

10/29/2025
 Date

Version	Revision Description	Author	Version Date	Effective Date
1	New policy	Publications Committee	14Oct2014	14Oct2014
2	Editorial changes & clarifications	Publications Committee	02Nov2014	02Nov2014
3	Editorial changes & clarifications	Publications Committee	17Jul2015	17Jul2015
4	Editorial changes & clarifications	Publications Committee	21Mar2017	21Mar2017
5	Editorial changes & clarifications	Publications Committee	06Mar2018	06Mar2018
6	Editorial changes & clarifications	Publications Committee	18Feb2020	18Feb2020
7	Added sections or clarifications on requirements for reassignment/removal of authors, last author assignment, authorship agreements, joint first/last author assignments, examples for authorship agreements, and an appendix clarifying authorship inclusion/order. Editorial changes and clarifications were incorporated.	Publications Committee	09Aug2023	09Aug2023
8	Added sections or clarifications on Public Access Policy	Publications Committee	29Oct2025	29Oct2025

	<p>requirements, primary endpoint manuscript planning, authorship agreements, joint first/last author assignments, treatment atlas/white/review paper requirements, and committee membership inclusion. Editorial changes and clarifications were incorporated.</p>			
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Appendix A – Authorship Order for Protocol-specified Analyses

Authorship Role – Order	Protocol-specified Analyses		
	Primary Protocol Endpoints	Secondary Protocol Endpoint(s)	Exploratory Protocol Endpoints
First Author	1	1	1
NRG Oncology Statistician	2	2	2
Study Chair of Trial (if not 1 st author)	3	3	3
Study Co-Chair(s)	4*	4*	4*
Accrual author(s)	5	5	5
Laboratory Scientific Staff	no	no	no
NCTN Champion (must have made significant scientific/intellectual contributions)	6*	6*	6*
Protocol Statistician (if not 2 nd author)	7*	7*	7*
Last AUTHOR POSITIONS			
Secondary Committee Chair (penultimate position)	8*	8*	8*
<i>Primary</i> Committee Chair (at time of activation or by agreement) (last author)	9	9	9
PI of Laboratory/Project (also see Middle Author Position)	no	no	no

The above guidelines are not guaranteed but are contingent upon meeting all criteria for authorship as established by the [International Committee of Medical Journal Editors](#) (ICMJE).

*If applicable and appropriate. See 2.A.ii.

Appendix B – Authorship Order for Non-protocol-specified Analyses

ANCILLARY ANALYSIS

Authorship Role – Order	Ancillary Analysis
First Author (AP Lead Contact / Investigator)	1
NRG Oncology statistician / other approved statistician	2
Critical ancillary investigators from AP application	3
Other approved co-authors	4*
Study Chair / PI of Trial(s), if not 1 st author	5*
Accrual author(s), based on NRG study data used in publication(s)	6*
Protocol statistician, if not 2 nd author	7*
Last AUTHOR POSITION	
<i>Primary</i> Committee Chair at time of study activation or project approval or by agreement is Last Author	8

The above guidelines are not guaranteed but contingent upon meeting all criteria for authorship as established by the [International Committee of Medical Journal Editors](#) (ICMJE).

* If applicable and appropriate.

Note: Methodology Analyses - Determined on a case-by-case basis.

Appendix C – Authorship Order for Non-protocol-specified Analyses

TRANSLATIONAL SCIENCE (TS) ANALYSIS

Authorship Role – Order	Translational Science (TS) Analysis
First Author (Principal / Lead Investigator)	1
NRG Oncology statistician / other approved statistician	2
Critical Translational Science (TS) investigators	3
Study Chair / PI of Trial(s), if not 1 st author	4*
Accrual author(s), based on NRG study data used in publication(s)	5*
Protocol statistician, if not 2 nd author	6*
Protocol TS / Correlative Biology Co-chair, if different from PI	7*
<i>Primary</i> Committee Chair at time of study activation or project approval or by agreement	Penultimate*
Last AUTHOR POSITION	
Generally, either the Committee TS Vice-chair or the Disease Site Chair, or other appropriate NRG Oncology Committee Vice-chair is Last Author	8

The above guidelines are not guaranteed but contingent upon meeting all criteria for authorship as established by the [International Committee of Medical Journal Editors](#) (ICMJE).

* If applicable and appropriate.

Note: Methodology Analyses - Determined on a case-by-case basis.

Appendix D – Authorship Order for Non-protocol-specified Analyses

PHYSICS/ DOSIMETRY-BASED ANCILLARY ANALYSIS

Authorship Role – Order	Physics/ Dosimetry-based Ancillary Analysis
First Author	1
NRG Oncology statistician / other approved statistician	2*
Investigators critical to the development/conduct of the study	3*
Study Chair / PI of Trial(s), if not 1 st author	4
Accrual author(s), based on NRG study data used in publication(s)	5*
Last AUTHOR POSITION	
Generally, the physics study co-chair or Physics Committee chair based on origination of the project is Last Author	6

The above guidelines are not guaranteed but contingent upon meeting all criteria for authorship as established by the [International Committee of Medical Journal Editors](#) (ICMJE).

* If applicable and appropriate.

Note: Methodology Analyses - Determined on a case-by-case basis.

Appendix E – Authorship Order for Non-protocol-specified Analyses

PRO/QOL/ COMPARATIVE EFFECTIVENESS (CE) ANCILLARY ANALYSIS (PCOR)

Authorship Role – Order	PRO/QOL/ Comparative Effectiveness (CE) Ancillary Analysis (PCOR)
First Author	1
NRG Oncology statistician / other approved statistician	2
PRO/QOL/CE research investigators critical to the development and conduct of the study	3*
Study Chair/PI of Trial(s), if not 1 st author	4*
Accrual author(s), based on NRG study data used in publication(s)	5*
Protocol Statistician, if not 2 nd author	6*
PRO/QOL/CE co-chair, if different from first author	7*
<i>Primary</i> Committee Chair at time of study activation or project approval or by agreement	Penultimate*
Last AUTHOR POSITION	
Generally, the PRO/QOL/CE Committee Vice-chair	8


The above guidelines are not guaranteed but contingent upon meeting all criteria for authorship as established by the [International Committee of Medical Journal Editors](#) (ICMJE).

* If applicable and appropriate.

Note: Methodology Analyses - Determined on a case-by-case basis.

Appendix F – Primary Endpoint Manuscript Development Discussion Planning Form

fillable form available at: XXXXXX



Advancing Research. Improving Lives.™

MANUSCRIPT Development

PRIMARY ENDPOINT

Discussion Planning Form

Documentation of Manuscript Development Planning Call

PROTOCOL TITLE

Protocol Number: [text]
 Protocol Title: [text]

PLANNING CALL INFORMATION – Call should take place 1 to 2 months after abstract submission. First author and the responsible committee chair will determine if any additional participants are required for the call. First author will arrange the call, complete this Planning Form, and return it to Publications.

Date of Call: [text] Comments: [text]

Participants – Name / Email / Institution	Role
Name / Email / Institution: [text]	First Author
Name / Email / Institution: [text]	Corresponding Author
Name / Email / Institution: [text]	Statistician
Name / Email / Institution: [text]	Responsible Committee Chair
Name / Email / Institution: [text]	[text]
Name / Email / Institution: [text]	[text]
Name / Email / Institution: [text]	[text]
Name / Email / Institution: [text]	[text]
Name / Email / Institution: [text]	[text]
Name / Email / Institution: [text]	[text]

RELATED ABSTRACT – To be completed by Publications Staff

Meeting: [text] Year: [text] First Author: [text] **PUBID#**: [text]

JOURNAL INFORMATION / SUBMISSION PLAN

Intended Journal 1st submission: [text]

Intended Journal 2nd submission: [text]

Publication Plan: (Analysis agreed to by participants) [text]

EXISTING STATISTICAL ANALYSIS

Date of Statistical Results Report: [text] Date: [text]

ADDITIONAL ANALYSES NEEDED

yes no Explain: [text]

AUTHORS NOT LISTED ABOVE UNDER CALL PARTICIPANTS

Other Key Contributors (not on the face sheet and not accrual authors) to be included on the author line	Role
Name / Email / Institution: [text]	[text]

1

Name / Email / Institution: [REDACTED] / [REDACTED] / [REDACTED]	[REDACTED]
Name / Email / Institution: [REDACTED] / [REDACTED] / [REDACTED]	[REDACTED]
Name / Email / Institution: [REDACTED] / [REDACTED] / [REDACTED]	[REDACTED]
Name / Email / Institution: [REDACTED] / [REDACTED] / [REDACTED]	[REDACTED]

MANUSCRIPT TITLE

Title (if known): [REDACTED]

TIMELINE

<input type="checkbox"/> Additional analysis, if required	Date: Click here to enter a date.	Notes: [REDACTED]
1 st draft to Publications	Date: Click here to enter a date.	Notes: [REDACTED]
Target submission date	Date: Click here to enter a date.	Notes: [REDACTED]

COMMITTEE(S)

Primary Committee: [Please specify committee.](#)

1st AUTHOR completes this form and sends to Publications at the end of the Planning Call

Completed by: [REDACTED] Date: [Click here to enter a date.](#)

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