

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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#### 4. Intellectual Property.

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

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Zhen-Hua

2. Surname (Last Name)

Chen

3. Date

20-March-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

Shu-Qun Cheng

5. Manuscript Title

A new classification for hepatocellular carcinoma with hepatic vein tumor thrombus

6. Manuscript Identifying Number (if you know it)

HBSN-19-491

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

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Dr. Chen has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name) Kang	2. Surname (Last Name) Wang	3. Date 20-March-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Shu-Qun Cheng
5. Manuscript Title A new classification for hepatocellular carcinoma with hepatic vein tumor thrombus		
6. Manuscript Identifying Number (if you know it) HBSN-19-491		

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

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1. Given Name (First Name) Xiu-Ping	2. Surname (Last Name) Zhang	3. Date 20-March-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Shu-Qun Cheng
5. Manuscript Title A new classification for hepatocellular carcinoma with hepatic vein tumor thrombus		
6. Manuscript Identifying Number (if you know it) HBSN-19-491		

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Dr. Zhang has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name) Jing-Kai	2. Surname (Last Name) Feng	3. Date 20-March-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Shu-Qun Cheng
5. Manuscript Title A new classification for hepatocellular carcinoma with hepatic vein tumor thrombus		
6. Manuscript Identifying Number (if you know it) HBSN-19-491		

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Zong-Tao

2. Surname (Last Name)

Chai

3. Date

20-March-2020

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Shu-Qun Cheng

5. Manuscript Title

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



## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Wei-Xing	2. Surname (Last Name) Guo	3. Date 20-March-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Shu-Qun Cheng
5. Manuscript Title A new classification for hepatocellular carcinoma with hepatic vein tumor thrombus		
6. Manuscript Identifying Number (if you know it) HBSN-19-491		

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

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

Are there any relevant conflicts of interest?  Yes  No

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

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Are there any relevant conflicts of interest?  Yes  No

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

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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### Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Guo has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Jie	2. Surname (Last Name) Shi	3. Date 20-March-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Shu-Qun Cheng
5. Manuscript Title A new classification for hepatocellular carcinoma with hepatic vein tumor thrombus		
6. Manuscript Identifying Number (if you know it) HBSN-19-491		

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

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

Are there any relevant conflicts of interest?  Yes  No

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Are there any relevant conflicts of interest?  Yes  No

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

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Shi has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Meng-Chao	2. Surname (Last Name) Wu	3. Date 20-March-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Shu-Qun Cheng
5. Manuscript Title A new classification for hepatocellular carcinoma with hepatic vein tumor thrombus		
6. Manuscript Identifying Number (if you know it) HBSN-19-491		

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

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Are there any relevant conflicts of interest?  Yes  No

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

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Are there any relevant conflicts of interest?  Yes  No

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

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Wu has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Wan Yee	2. Surname (Last Name) Lau	3. Date 20-March-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Shu-Qun Cheng
5. Manuscript Title A new classification for hepatocellular carcinoma with hepatic vein tumor thrombus		
6. Manuscript Identifying Number (if you know it) HBSN-19-491		

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

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Are there any relevant conflicts of interest?  Yes  No

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

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Are there any relevant conflicts of interest?  Yes  No

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

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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### Section 5. Relationships not covered above

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Dr. Lau has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Shu-Qun

2. Surname (Last Name)  
Cheng

3. Date  
20-March-2020

4. Are you the corresponding author?  Yes  No

5. Manuscript Title  
A new classification for hepatocellular carcinoma with hepatic vein tumor thrombus

6. Manuscript Identifying Number (if you know it)  
HBSN-19-491

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