Date: 05/12/2021

Your Name: Avesh J. Thuluvath

Manuscript Title: Donor Quality of Life after Living Donor Liver Transplantation: A review of the Literature

Manuscript number (if known: DMR-20-151

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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	xNone	
3	Royalties or licenses	x_None	
4	Consulting fees	xNone	

5	Payment or honoraria for	xNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	x_None	
	testimony		
7	Support for attending meetings and/or travel	xNone	
8	Patents planned, issued or	x_None	
	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	
12	materials, drugs, medical	_xNone	
	writing, gifts or other		
	services		
13	Other financial or non-	x None	
	financial interests		
Plea	se summarize the above cor	nflict of interest in the follow	ving box:

certify that I have answered every question and have not altered the wording of any of the questions or orm

Date	4/12/2021
Your Name:	John Peipert
Manuscript Title:	Donor Quality of Life after Living Donor Liver Transplantation: A Review of the Literature
Manuscript numbe	er (if known):
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	medical writing, article		
	processing charges, etc.) No time limit for this item.		
		Time frame: past	36 months
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	entity (if not indicated in		
	item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	
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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	XNone	
	meetings and/or travel		
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8	Patents planned, issued or	XNone	
	pending		
		., .,	
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
10	Advisory Board	V 1	
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
- 1 1	group, paid or unpaid		
11	Stock or stock options	XNone	
4.0		V N	
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other		
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13	Other financial or non-	XNone	
	financial interests		
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Plea	ase summarize the above cor	iffict of interest in the fol	lowing box:
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	lo conflict of interest.		
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rm.				

Date: 04/09/2021

Your Name: Rachel Berkowitz

Manuscript Title: Donor Quality of Life after Living Donor Liver Transplantation: A review of the Literature

Manuscript number (if known: DMR-20-151

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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	xNone	
3	Royalties or licenses	xNone	
4	Consulting fees	xNone	

5	Payment or honoraria for	x_None	
	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 pending	xNone	
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	x None	
12	Receipt of equipment,	_xNone	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	_xNone	
	financial interests		
Plea	se summarize the above cor	oflict of interest in the foll	owing hov:
1 100	ise summarize the above con	mict of interest in the ion	OWING BOX.

rm.	swered every qu			

Date:4/21/21	
Your Name:Osama Siddiqui	
Manuscript Title:_ Donor Quality of Life after Living Donor Liver Transplantation: A	
Review of the Literature	
Manuscript number (if known):	

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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

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	X None	
/	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		
11	group, paid or unpaid Stock or stock options	X None	
11	Stock of Stock options		
12	Receipt of equipment,	X None	
12	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	_XNone	
	financial interests		
	se summarize the above cor	nflict of interest in the follo	owing box:

	se place an "X" next to the following statement to indicate your agreement:
<u>X_</u>	I certify that I have answered every question and have not altered the wording of any of the questions on this form.
	All authors have completed the ICMJE uniform disclosure form. The authors have no conflicts of interest to declare.

Date: 4/14	4/21
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Your Name: Bridget Whitehead

Manuscript Title: Donor Quality of Life after Living Donor Liver Transplantation: A Review of the Literature

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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	

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

ertify that I orm.	"X" next to the follo have answered evo	ery question and	have not altere	d the wording o	f any of the que	stions on th

Date:08/07/2021_	
Your Name:	Arielle Thomas
Manuscript Title:	Donor Quality of life after Living donor transplantation: A review of the
literature	
Manuscript number (if	known):

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		Time frame: past	36 months
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3	Royalties or licenses	x_None	
4	Consulting fees	xNone	

5	Payment or honoraria for	xNone			
	lectures, presentations,				
	speakers bureaus,				
	manuscript writing or				
	educational events				
6	Payment for expert	x_None			
	testimony				
7	Support for attending meetings and/or travel	xNone			
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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				
11	group, paid or unpaid	Nama			
11	Stock or stock options	_xNone			
12	Receipt of equipment,	x None			
12	materials, drugs, medical	xNone			
	writing, gifts or other				
	services				
13	Other financial or non-	x None			
	financial interests				
			•		
Plea	ise summarize the above co	nflict of interest in the f	ollowing box:		

I have no financial conflicts of interest		

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Date:	April 21, 2021	
Your Name:	Josh Levitsky	_
Manuscript Title	e:	
Manuscript nur	nber (if known):	

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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	xNone	
3	Royalties or licenses	xNone	
4	Consulting fees	x_None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	_xNone	
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 Safety Monitoring Board or Advisory Board	_xNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	x_None	
11	Stock or stock options	xNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	_xNone	
13	Other financial or non- financial interests	xNone	
Plea	se summarize the above cor	nflict of interest in the follow	wing box:

orm.	answered e	very questic	on and nave	not altered	d the wordin	B 01 411, 01 ti	re questions	On this

Date: April 22, 2021
Your Name: Juan Carlos Caicedo, MD
Manuscript Title: Donor Quality of Life after Living Donor Liver Transplantation: A Review of the Literature
Manuscript number (if known): DMR-20-151

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3	Royalties or licenses	_XNone	
4	Consulting fees	<u>X</u> None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	X_None	
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	
9	Safety Monitoring Board or	_ <u>X</u> _None	
	Advisory Board		
10	Leadership or fiduciary role	X None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X_None	
12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	None	
15	financial interests	None	
Plea	se summarize the above co	nflict of interest in the fo	llowing box:

_X I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date: 05/12/2021

Your Name: Daniela P. Ladner

Manuscript Title: Donor Quality of Life after Living Donor Liver Transplantation: A review of the Literature

Manuscript number (if known: DMR-20-151

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3	Royalties or licenses	x_None	
4	Consulting fees	xNone	

5	Payment or honoraria for	xNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	xNone	
	testimony		
7	Company for attackling	y Nana	
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	x None	
	Stock of Stock options		
12	Receipt of equipment,	x None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	_xNone	
	financial interests		
Plea	se summarize the above cor	nflict of interest in the foll	owing box:

