ICMJE DISCLOSURE FORM

Date:	2/20/2022
Your Name:	Huasheng LAI
Manuscript Title:	Adipose derived mesenchymal stem cells in gastrointestinal system anastomosis
Manuscript Number (if known):	DMR-22-21

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 author's relationships/activities/interests should be defined broadly. 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 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 initial plan	ning 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	None	Click the tab key to add additional rows.
	this item.		
		Time frame: past 36 m	onths
2	Grants or contracts from any entity (if not indicated in item #1 above).	✓ None	

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		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)
3	Royalties or licenses	None	
4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None	
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None	
10	Leadership or fiduciary role in	None	

		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)
	other board, society, committee or advocacy group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non-financial interests	None	
Dlo	asa nlaca an "Y" r	next to the following statement to indicate your	agraement:

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

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

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Date:			2/20/2022	
Υοι	ır Name:		Zhiwei Dong	
Maı	nuscript Title:		Adipose derived mesenchymal stem cel	ls in gastrointestinal system anastomosis
	nuscript Number (i own):	f	DMR-22-21	
to the content of your manuscrinterests may be affected by the			cript. "Related" means any relation with for	ctivities/interests listed below that are related r-profit or not-for-profit third parties whose represents a commitment to transparency and o list a relationship/activity/interest, it is
the	epidemiology of hyp	pertens	ivities/interests should be defined broadly. sion, you should declare all relationships w cation is not mentioned in the manuscript.	For example, if your manuscript pertains to ith manufacturers of antihypertensive
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			all entities with whom you have this onship or indicate none (add rows as ed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
			Time frame: Since the initial planni	ng of the work
1	All support for the present	X	None	
	manuscript (e.g., funding,			
	provision of			Click the tab key to add additional rows.
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			Time frame: past 36 mor	nths
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Date:			2/20/2022		
Yo	ur Name:		Philip Wai Yan CHIU		
Ма	nuscript Title:		Adipose derived mesenchymal stem cel	ls in gastrointestinal system anastomosis	
	nuscript Number (it own):	f	DMR-22-21		
to the content of your manuscrinterests may be affected by the			ript. "Related" means any relation with for	ctivities/interests listed below that are related r-profit or not-for-profit third parties whose represents a commitment to transparency and o list a relationship/activity/interest, it is	
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	funding,				
	provision of study materials,			Click the tab key to add additional rows.	
medical writing, article processing charges, etc.) No time limit for this item.					
			Time frame: past 36 mor	nths	J
2	Grants or contracts from	x N	lone		
	any entity (if not indicated in				
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