## ICMJE DISCLOSURE FORM

18/1	n/Apa2.					
Date:	0/00000					
Your Name:	Modios.	0 1		_	Α	
Manuscript Title:	tanding.	Du. on	And	Wadso	1/1 Greda	C.
Manuscript number (if kno	wn):	١٩٠	WOLE	10	(1)	
•		0 .		J	CONGZ,	

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

		Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initia	Specifications/Comments (e.g., if payments were made to you or to your institution)
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  No time limit for this item.	None	
		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	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
7	Support for attending	None	
	meetings and/or travel		
8	Patents planned, issued or	None	
	pending		
	periama		
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	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		
		•	

Please summarize the above conflict of interest in the following box:

no conflicted	interest.

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.

## ICMJE DISCLOSURE FORM

Date: 2022.10.10

Your Name: Annabel Liao

Manuscript Title: Interview with Prof. Chérif Akladios: Sentinel lymph node in gynaecologic malignancy, the beginning

of a new area in lymph node surgery

Manuscript number (if known): CCO-22-99(CCO-2022-OGE-05)

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

		Name all entities with 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	planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  No time limit for this item.	None	
		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	

6	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events 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 other board, society, committee or advocacy group, paid or unpaid	None	
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	
Dle	ase summarize the above o	onflict of interest in the fol	lowing hox:

1	Annabel Liao is a full-time employee of AME Publishing Company, the publisher of Chinese Clinical Oncology.

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

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

	ICMJE [	DISCLOSURE FORM
Date:	October 10th, 2022	
Your Name:	Yixuan Zeng	
Manuscript Title:	Interview wit	h Prof. Chérif Akladios: Sentinel lymph node in gynaecologic
malignancy, the beginning	ig of a new area in lymr	oh node surgery
Manuscript number (if kno	wn): <u>CC</u>	O-22-99 (CCO-2022-OGE-05)
related to the content of your parties whose interests ma	our manuscript. "Related' y be affected by the cont not necessarily indicate a	se all relationships/activities/interests listed below that are "means any relation with for-profit or not-for-profit third ent of the manuscript. Disclosure represents a commitment bias. If you are in doubt about whether to list a ou do so.
The following questions ap manuscript only.	ply to the author's relation	onships/activities/interests as they relate to the current
•	ertension, you should de	d be <u>defined broadly</u> . For example, if your manuscript pertains clare all relationships with manufacturers of antihypertensive d in the manuscript.
In item #1 below, report all the time frame for disclosu	• • • • • • • • • • • • • • • • • • • •	ported in this manuscript without time limit. For all other items,

		Name all entities with whom you have this relationship or indicate none (add rows as needed)  Time frame: Since the initia	Specifications/Comments (e.g., if payments were made to you or to your institution)  planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  No time limit for this item.	XNone	
		Time frame: 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 lectures, presentations,	<b>X</b> None			
	speakers bureaus, manuscript writing or educational events				
6	Payment for expert	<b>X</b> None			
	testimony				
_	0 16 11 11				
7	Support for attending meetings and/or travel	<b>X</b> None			
8	Patents planned, issued or pending	<b>X</b> None			
	pending				
9	Participation on a Data	<b>X</b> None			
	Safety Monitoring Board or				
	Advisory Board				
10	Leadership or fiduciary role in other board, society,	<b>X</b> None			
	committee or advocacy				
	group, paid or unpaid				
11	Stock or stock options	<b>X</b> None			
12	Receipt of equipment,	V Nove			
12	materials, drugs, medical	<b>X</b> None			
	writing, gifts or other				
	services				
13	Other financial or non-	<b>X</b> None			
	financial interests				
Plea	Please summarize the above conflict of interest in the following box:				
Υ	Yixuan Zeng is an intern editor of AME Publishing Company, the publisher of Chinese Clinical Oncology.				

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

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