Date: 27-February-2023 Your Name: Junichi Kaneko

Manuscript Title: "Pancreaticoduodenectomy - How to handle a replaced right hepatic artery-"

Manuscript number (if known): HBSN-23-117

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.

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		Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution)
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2	Grants or contracts from any entity (if not indicated in item #1 above).	None	36 months
3	Royalties or licenses	None	
4	Consulting fees	None	

5	Payment or nonoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony	140110	
	,		
7	Support for attending	None	
,	meetings and/or travel	None	
	meetings and, or traver		
8	Patents planned, issued or	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	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		
Plea	ise summarize the above co	onflict of interest in the	following box:

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

Date: 27-February-2023 Your Name: Akihiko Ichida

Manuscript Title: "Pancreaticoduodenectomy -How to handle a replaced right hepatic artery-"

Manuscript number (if known): HBSN-23-117

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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)
		Time frame: Since the initial	planning of the work
1	All support for the present	None	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
	any entity (if not indicated		
	in item #1 above).		
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 meetings and/or travel	None	
	,		
8	Patents planned, issued or	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	
	materials, drugs, medical		
	writing, gifts or other		
42	services		
13	Other financial or non-	None	
	financial interests		
Plea	ase summarize the above co	inflict of interest in the fo	llowing box:

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

Date: 27-February-2023

Your Name: Yoshikuni Kawaguchi

Manuscript Title: "Pancreaticoduodenectomy -How to handle a replaced right hepatic artery-"

Manuscript number (if known): HBSN-23-117

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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 nonoraria 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		
	Determination of income day	News	
8	Patents planned, issued or	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	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		
Plos	ase summarize the above co	inflict of interest in the fol	lowing hox:
1 100	ise summarize the above to	inite of interest in the for	iowing box.

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

Date: 27-February-2023

Your Name: Kiyoshi Hasegawa

Manuscript Title: "Pancreaticoduodenectomy -How to handle a replaced right hepatic artery-"

Manuscript number (if known): HBSN-23-117

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		Time frame: Since the initial	planning of the work
1	All support for the present	None	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	Eisai Co., Ltd.	Grant for institution
	any entity (if not indicated	Otsuka Pharmaceutical	Grant for institution
	in item #1 above).	Co., Ltd.	
		KAKEN PHARMACEUTICAL	Grant for institution
		CO.,LTD.	
		Tsumura & Co.	Grant for institution
		Yakult Honsha Co., Ltd.	Grant for institution
		Taiho Pharmaceutical Co.,	Grant for institution
		Ltd.	
		Takeda Pharmaceutical	Grant for institution
		Co., Ltd.	
		Chugai Pharmaceutial Co.,	Grant for institution
		Ltd.	

		Bayer Yakuhin, Ltd.	Grant for institution
		Eli Lilly Japan K.K.	Grant for institution
		MSD K.K.	Research funding for institution
		Shimazu Corporation	Research funding for institution
		NIPRO CORPORATION	Research funding for institution
		Mochida Pharmaceutical Co., Ltd.	Research funding for institution
3	Royalties or licenses	None	
4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations,	None	
	speakers bureaus, manuscript writing or educational events		
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or	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	
	materials, drugs, medical		
	writing, gifts or other		
12	Services	Nama	
13	Other financial or non-	None	
	financial interests		

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

-	

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