Date	2023/6/11
Your	Name:Aijun Liang
	script Title: The conclusion of reducing acute rejection after liver transplantation by machine perfusion should be polated with caution
Man	script number (if known): HBSN-23-180
relat parti to tra	interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are d to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third is whose interests may be affected by the content of the manuscript. Disclosure represents a commitment insparency and does not necessarily indicate a bias. If you are in doubt about whether to list a conship/activity/interest, it is preferable that you do so.
	ollowing questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> script only.
to th	uthor's relationships/activities/interests should be <u>defined broadly</u> . For example, if your manuscript pertains epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive ration, even if that medication is not mentioned in the manuscript.
	m #1 below, report all support for the work reported in this manuscript without time limit. For all other items, me frame for disclosure is the past 36 months.
	Name all entities with Specifications/Comments
	whom you have this (e.g., if payments were made to you or to your

		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) 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	
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	

6	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert testimony	None 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	

No conflicts of interest	

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.

Date:2023/6/11	
Your Name:Linya Zhang	
Manuscript Title: The conclusion of reducing acute rejextrapolated with caution	ection after liver transplantation by machine perfusion should be
Manuscript number (if known): HBSN-23-180	

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 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.

		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.		
	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			
43	Descript of any t	News			
12	Receipt of equipment, materials, drugs, medical	None			
	writing, gifts or other				
	services				
13	Other financial or non-	None			
	financial interests				
Plea	Please summarize the above conflict of interest in the following box:				

No conflicts of interest		

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.

Date:2023/6/11
Your Name: Junjun Jia
Manuscript Title: The conclusion of reducing acute rejection after liver transplantation by machine perfusion should be extrapolated with caution
Manuscript number (if known): HBSN-23-180
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The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u> .

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1	All support for the present	None	
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	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		
4.4	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		

No conflicts of interest		

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.

Date:_	2023/6/11	
Your N	ame:Kebo Zhong	
	cript Title: The conclusion of reducing acute rejection after liver transplantation by machine perfusion should plated with caution	be
Manus	cript number (if known): HBSN-23-180	
	nterest of transparency, we ask you to disclose all relationships/activities/interests listed below that are to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third	

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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 Safety Monitoring Board or	None	
	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		

No conflicts of interest		

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.

Date:2023/6/11
Your Name:Yu Nie
Manuscript Title: The conclusion of reducing acute rejection after liver transplantation by machine perfusion should be
extrapolated with caution
Manuscript number (if known): HBSN-23-180
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	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
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7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data Safety Monitoring Board or	None	
	Advisory Board		
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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		

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