

## ICMJJE DISCLOSURE FORM

**Date:** 10/17/2023

**Your Name:** Chao-Long Chen

**Manuscript Title:** Proton Beam Therapy for Downstaging Hepatocellular Carcinoma with Lobar Portal Vein Tumor Thrombosis to Living Donor Liver Transplantation

**Manuscript Number (if known):** HBSN-23-410

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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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.

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6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> None	
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> None	
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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:** 10/17/2023

**Your Name:** Leona Bettina P. Dungca

**Manuscript Title:** Proton Beam Therapy for Downstaging Hepatocellular Carcinoma with Lobar Portal Vein Tumor Thrombosis to Living Donor Liver Transplantation

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**Your Name:** Chee-Chien Yong

**Manuscript Title:** Proton Beam Therapy for Downstaging Hepatocellular Carcinoma with Lobar Portal Vein Tumor Thrombosis to Living Donor Liver Transplantation

**Manuscript Number (if known):** HBSN-23-410

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**Date:** 10/17/2023

**Your Name:** Itsuko Chih-Yi Chen

**Manuscript Title:** Proton Beam Therapy for Downstaging Hepatocellular Carcinoma with Lobar Portal Vein Tumor Thrombosis to Living Donor Liver Transplantation

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**Your Name:** Yu-Fan Cheng

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## ICMJE DISCLOSURE FORM

**Date:** 10/17/2023

**Your Name:** Jen-Yu Cheng

**Manuscript Title:** Proton Beam Therapy for Downstaging Hepatocellular Carcinoma with Lobar Portal Vein Tumor Thrombosis to Living Donor Liver Transplantation

**Manuscript Number (if known):** HBSN-23-410

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**Date:** 10/17/2023

**Your Name:** Yen-Yang Chen

**Manuscript Title:** Proton Beam Therapy for Downstaging Hepatocellular Carcinoma with Lobar Portal Vein Tumor Thrombosis to Living Donor Liver Transplantation

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9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input checked="" type="checkbox"/> 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)
<b>11</b>	Stock or stock options	<input checked="" type="checkbox"/> <b>None</b>	
<b>12</b>	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> <b>None</b>	
<b>13</b>	Other financial or non-financial interests	<input checked="" type="checkbox"/> <b>None</b>	

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.