Date:		
Your Name:	Dapeng Wang	J
Manuscript Title:	'	a model to predict the risk of recurrence in patients with laryngeal squamous cell
	al laryngectomy	
Manuscript numbei	r (if known):	
In the interest of tra	ansparency, we ask	you to disclose all relationships/activities/interests listed below that are

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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)
			planning of the work
1	All support for the present	XNone	
	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	X None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	X None	
	testimony	ANone	
	,		
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	X None	_
9	Safety Monitoring Board or	^_NOTE	
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid	V N	
11	Stock or stock options	XNone	
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
Plea	se summarize the above co	nflict of interest in the foll	owing box:

None			

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

Date:	2022/9/28	
Your Name:	Ruyuan Guo _	
Manuscript Title:	Development of	a model to predict the risk of recurrence in patients with laryngeal squamous cell
carcinoma after tota	al laryngectomy	
Manuscript number	(if known):	

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		Time frame: past	36 months
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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

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5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
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7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
	_		
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other		
12	services Other financial or non-	V None	
13	Other financial or non- financial interests	XNone	
	illianciai interests		

None			

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

Date:	2022/9/28	
Your Name:	Ning Luo	
Manuscript Title:	Development of	f a model to predict the risk of recurrence in patients with laryngeal squamous cell
carcinoma after tota	al laryngectomy	
Manuscript number	(if known):	

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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
Plea	se summarize the above co	nflict of interest in the foll	owing box:

None			

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

Date:	2022/9/28	
Your Name:	Xiaolu Ren	
Manuscript Title:	Development of a	model to predict the risk of recurrence in patients with laryngeal squamous cell
carcinoma after tota	al laryngectomy	_
Manuscript number	(if known):	

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		Time frame: past	36 months
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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

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5	5 Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
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8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society, committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	XNone	
	financial interests		
		•	•

None			

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

Date:	2022/9/21	
Your Name:	Ameya A. Asarkar	
	Development of a model to predict the risk of recurrence in patients with laryngeal squamous co	:II
	al laryngectomy	
Manuscript numbei	r (if known):	
	ansparency, we ask you to disclose all relationships/activities/interests listed below that are ent of your manuscript. "Related" means any relation with for-profit or not-for-profit third	
	ests may be affected by the content of the manuscript. Disclosure represents a commitment	
•	does not necessarily indicate a bias. If you are in doubt about whether to list a	
elationship/activit	y/interest, it is preferable that you do so.	

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	No time limit for this item.		
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	in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	
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5	Payment or honoraria for	XNone			
	lectures, presentations,				
	speakers bureaus,				
	manuscript writing or				
	educational events				
6	Payment for expert	XNone			
	testimony				
7	Support for attending meetings and/or travel	XNone			
	meesinge ana, er a are.				
8	Patents planned, issued or	XNone			
	pending				
9	Participation on a Data	XNone			
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	Advisory Board				
10	Leadership or fiduciary role	XNone			
	in other board, society,				
	committee or advocacy				
	group, paid or unpaid				
11	Stock or stock options	XNone			
12	Receipt of equipment,	XNone			
	materials, drugs, medical				
	writing, gifts or other				
4.5	services				
13	Other financial or non-	XNone			
	financial interests				
Plea	Please summarize the above conflict of interest in the following box:				

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

None

Date:	2022/9/28	
Your Name:	Haixia Jia	
Manuscript Title: carcinoma after tota	al laryngectomy	a model to predict the risk of recurrence in patients with laryngeal squamous cell
ivianuscript number	(II KIIOWII)	<del></del>
	•	you to disclose all relationships/activities/interests listed below that are ipt. "Related" means any relation with for-profit or not-for-profit third

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	in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
	,		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	n other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	XNone	
materia	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

None			

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

Date:	2022/9/28	
Your Name:	Fang Yang	
Manuscript Title:	Development of	a model to predict the risk of recurrence in patients with laryngeal squamous cell
carcinoma after tota	al laryngectomy	
Manuscript number	(if known):	

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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	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
	,		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

None		

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

Date:	_2022/9/28	
Your Name:	Shuhui Ren	
Manuscript Title:	Development of a model to predict the risk of recurrence in patients with laryngeal squ	uamous cell
carcinoma after tota	laryngectomy	
Manuscript number	f known):	

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7	Support for attending meetings and/or travel	XNone	
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12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	XNone	
	financial interests		
-			
<b>DI</b> .		CITAL COLLEGE COLLEGE	. 11

None			

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

Date:	2022/9/28	
Your Name:	Ping Lu	
carcinoma after tot	al laryngectomy	a model to predict the risk of recurrence in patients with laryngeal squamous cell
related to the conte	nt of your manuscri	you to disclose all relationships/activities/interests listed below that are pt. "Related" means any relation with for-profit or not-for-profit third by the content of the manuscript. Disclosure represents a commitment

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3	Royalties or licenses	XNone	
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5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
6	educational events Payment for expert	X None	
O	testimony		
	testimony		
7	Support for attending	X None	
	meetings and/or travel		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
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11	Stock or stock options	X None	
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other		
42	services	V. Nara	
13	Other financial or non- financial interests	XNone	
	illiancidi litterests		

None			

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