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)	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		
6	educational events	Nono	
0	Payment for expert testimony	VNone	
	testimony		
7	Support for attending	√ None	
'	meetings and/or travel		
8	Patents planned, issued or	√ None	
0	pending		
	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	VNone	
12	Receipt of equipment,	√ None	
12	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	√None	
	financial interests		

None.

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

Date: <u>Feb 23th, 2022</u> Your Name: <u>Jiahong Dong</u> Manuscript Title: <u>Hepatic artery infusion chemotherapy with mFOLFOX in primary liver cancer patients with</u> <u>hyperbilirubinemia and ineffective drainage: a single-center real-world study</u> Manuscript number (if known):______

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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		Time frame: Since the initial	planning of the work
1	All support for the present	√None	
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	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		
6	educational events	Nora	
6	Payment for expert testimony	√None	
	testimony		
7	Support for attending	√ None	
'	meetings and/or travel		
8	Patents planned, issued or	√None	
	pending		
9	Participation on a Data Safety Monitoring Board or	VNone	
	Advisory Board		
10	Leadership or fiduciary role	VNone	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	√ None	
11	SLOCK OF SLOCK OPTIONS		
12	Receipt of equipment,	√ None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	√None	
	financial interests		

None.

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

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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)
	1	Time frame: Since the initial	planning of the work
1	All support for the present	VNone	
	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		
6	educational events	Nora	
6	Payment for expert testimony	√None	
	testimony		
7	Support for attending	√ None	
'	meetings and/or travel		
8	Patents planned, issued or	√None	
	pending		
9	Participation on a Data Safety Monitoring Board or	VNone	
	Advisory Board		
10	Leadership or fiduciary role	VNone	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	√ None	
11	SLOCK OF SLOCK OPTIONS		
12	Receipt of equipment,	√ None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	√None	
	financial interests		

None.

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

Date: <u>Feb 23th, 2022</u> Your Name: <u>Zhizhong Ren</u> Manuscript Title: <u>Hepatic artery infusion chemotherapy with mFOLFOX in primary liver cancer patients with</u> <u>hyperbilirubinemia and ineffective drainage: a single-center real-world study</u> Manuscript number (if known):______

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.

		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)
1	All support for the present	Time frame: Since the initial √ None	planning of the work
-	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.) No time limit for this item.		
	No time inne for this item.		
		Time frame: past	36 months
2	Grants or contracts from	√None	
	any entity (if not indicated		
3	in item #1 above).	V. Neze	
3	Royalties or licenses	VNone	
4	Consulting fees	√None	

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

None.

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

Date: <u>Feb 23th, 2022</u> Your Name: <u>Ying Liu</u> Manuscript Title: <u>Hepatic artery infusion chemotherapy with mFOLFOX in primary liver cancer patients with</u> <u>hyperbilirubinemia and ineffective drainage: a single-center real-world study</u> Manuscript number (if known):______

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)	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.	Time frame: Since the initial√None	planning of the work
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	VNone	
3	Royalties or licenses	√None	
4	Consulting fees	VNone	

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

None.

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

Date: <u>Feb 23th, 2022</u> Your Name: <u>Xiaowei Yang</u> Manuscript Title: <u>Hepatic artery infusion chemotherapy with mFOLFOX in primary liver cancer patients with</u> <u>hyperbilirubinemia and ineffective drainage: a single-center real-world study</u> Manuscript number (if known):______

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>.

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-	manuscript (e.g., funding,		
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	No time inne for this item.		
		Time frame: past	36 months
2	Grants or contracts from	vNone	
	any entity (if not indicated		
3	in item #1 above).	V. Neze	
3	Royalties or licenses	VNone	
4	Consulting fees	√None	

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

None.

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

Date: <u>Feb 23th, 2022</u> Your Name: <u>Dawei Sun</u> Manuscript Title: <u>Hepatic artery infusion chemotherapy with mFOLFOX in primary liver cancer patients with</u> <u>hyperbilirubinemia and ineffective drainage: a single-center real-world study</u> Manuscript number (if known):______

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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	No time inne for this item.				
	Time frame: past 36 months				
2	Grants or contracts from	vNone			
	any entity (if not indicated				
2	in item #1 above).	V. Neze			
3	Royalties or licenses	VNone			
4	Consulting fees	v_None			

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

None.

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

Date: <u>Feb 23th, 2022</u> Your Name: <u>Yaqin Wang</u> Manuscript Title: <u>Hepatic artery infusion chemotherapy with mFOLFOX in primary liver cancer patients with</u> <u>hyperbilirubinemia and ineffective drainage: a single-center real-world study</u> Manuscript number (if known):______

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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	Time frame: past 36 months				
2	Grants or contracts from any entity (if not indicated in item #1 above).	VNone			
3	Royalties or licenses	√None			
4	Consulting fees	VNone			

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

None.

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