ICMJE DISCLOSURE FORM

Date: _____2022/5/13_____

Your Name: _____ Yuequan Jiang _____

Manuscript Title:_____ Comparisons of prognosis prediction accuracy between modified and unmodified versions of eighth edition ypTNM_____

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 manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) **No time limit for this item.**	__X__None	
**Time frame: past 36 months**
2	Grants or contracts from any entity (if not indicated in item #1 above).	__X__None	
3	Royalties or licenses	__X__None	
4	Consulting fees	__X__None	

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

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

None.

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

<u>X</u> **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: _____2022/5/13_____

Your Name: _____ Yu Huang_____

Manuscript Title:_____ Comparisons of prognosis prediction accuracy between modified and unmodified versions of eighth edition ypTNM_____

Manuscript number (if known):_____

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ICMJE DISCLOSURE FORM

Date: _____2022/5/13_____

Your Name: _____ Zhiqiang Wang _____

Manuscript Title:_____ Comparisons of prognosis prediction accuracy between modified and unmodified versions of eighth edition ypTNM_____

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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ICMJE DISCLOSURE FORM

Date: _____2022/5/13_____
Your Name: _____ Wei Xu _____
Manuscript Title:_____ Comparisons of prognosis prediction accuracy between modified and unmodified versions of eighth edition ypTNM_____
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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ICMJE DISCLOSURE FORM

Date: _____2022/5/13_____
Your Name: _____ Jian Xu _____
Manuscript Title:_____ Comparisons of prognosis prediction accuracy between modified and unmodified versions of eighth edition ypTNM_____
Manuscript number (if known):_____

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ICMJE DISCLOSURE FORM

Date: _____2022/5/13_____

Your Name: _____ Fei Teng _____

Manuscript Title:_____ Comparisons of prognosis prediction accuracy between modified and unmodified versions of eighth edition ypTNM_____

Manuscript number (if known):_____

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ICMJE DISCLOSURE FORM

Date: _____2022/5/13_____

Your Name: _____ Zhe Yin _____

Manuscript Title:_____ Comparisons of prognosis prediction accuracy between modified and unmodified versions of eighth edition ypTNM_____

Manuscript number (if known):_____

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None.

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X   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: 2022/5/13
Your Name: Raja M. Flores
Manuscript Title: Comparisons of prognosis prediction accuracy between modified and unmodified versions of eighth edition ypTNM
Manuscript number (if known): ATM-22-2353

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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ICMJE DISCLOSURE FORM

Date: _2022/5/13_____

Your Name:__Noriyuki Hirahara_____

Manuscript Title: Comparisons of prognosis prediction accuracy between modified and unmodified versions of eighth edition ypTNM

Manuscript number (if known):_____

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7	Support for attending meetings and/or travel	____None	
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9	Participation on a Data Safety Monitoring Board or Advisory Board	_ **X** _None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	_ **X** _None	
11	Stock or stock options	_ **X** _None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	_ **X** _None	
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ICMJE DISCLOSURE FORM

Date:__ 2022/5/13_____

Your Name:_____SOFOKLIS MITSOS_

Manuscript Title:_ Comparisons of prognosis prediction accuracy between modified and unmodified versions of eighth edition ypTNM

Manuscript number (if known):_____

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ICMJE DISCLOSURE FORM

Date:_____2022/5/13_____

Your Name:_____ Connor J. Wakefield_____

Manuscript Title:_____ Comparisons of prognosis prediction accuracy between modified and unmodified versions of eighth edition ypTNM_____

Manuscript number (if known):_____

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ICMJE DISCLOSURE FORM

Date: _____2022/5/13_____
Your Name: _____ Dongming Guo _____
Manuscript Title:_____ Comparisons of prognosis prediction accuracy between modified and unmodified versions of eighth edition ypTNM_____
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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