	te:Feb. 25 th , 2021 ur Name:Houyi Wei	-		
		t of preoperative hody ma	ass index on perioperative outcomes is optimized by en	hanced
	•	• •	ith intracorporeal urinary diversion	nancca
	nuscript number (if known)	-		
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rela par to	ated to the content of your ties whose interests may b	manuscript. "Related" me e affected by the content necessarily indicate a bias	Il relationships/activities/interests listed below that are eans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitmen s. If you are in doubt about whether to list a o so.	
	e following questions apply nuscript only.	to the author's relationsh	ips/activities/interests as they relate to the <u>current</u>	
to		ension, you should declar	e <u>defined broadly</u> . For example, if your manuscript pert e all relationships with manufacturers of antihypertens the manuscript.	
	tem #1 below, report all su time frame for disclosure i		ed in this manuscript without time limit. For all other i	tems,
		Name all entities with	Specifications/Comments	
		whom you have this	(e.g., if payments were made to you or to your	
		relationship or indicate none (add rows as	institution)	
		needed)		
		Time frame: Since the initia	al planning of the work	
1	All support for the present	X None		
_	manuscript (e.g., funding,			
	provision of study materials,			
	medical writing, article			
	processing charges, etc.)			
	No time limit for this item.			
		Time frame: pas	t 36 months	
2	Grants or contracts from	XNone		
	any entity (if not indicated			

in item #1 above).

Consulting fees

Royalties or licenses

X__None

X__None

3

_	Decima and an least access to	V. None	
5	Payment or honoraria for lectures, presentations,	XNone	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending	XNone	
,	meetings and/or travel		
	5		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
10	Advisory Board	V. Nama	
10	Leadership or fiduciary role in other board, society,	XNone	
	committee or advocacy		
	group, paid or unpaid		
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		
Ple	ease summarize the above c	onflict of interest in the fo	llowing box:
			-
	None.		

	te:Feb. 25 th , 2021 ur Name: Jiandong Gao _.			
rec		opic radical cystectomy w	ss index on perioperative outcomes is optimized by enhith intracorporeal urinary diversion	anced _
rel pa to	ated to the content of your rties whose interests may be	manuscript. "Related" me e affected by the content necessarily indicate a bias	Il relationships/activities/interests listed below that are eans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment . If you are in doubt about whether to list a o so.	
	e following questions apply nuscript only.	to the author's relationsh	ips/activities/interests as they relate to the <u>current</u>	
to		ension, you should declare	defined broadly. For example, if your manuscript pertal all relationships with manufacturers of antihypertensithe manuscript.	
	item #1 below, report all supertime frame for disclosure in		ed in this manuscript without time limit. For all other it	ems,
		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 initia	al 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.	XNone		
		Time frame: pas	t 36 months	
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone		
3	Royalties or licenses	XNone		

Consulting fees

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events	V N	
6	Payment for expert	XNone	
	testimony		
7	Support for attending	X None	
/	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	X None	
	Stock of Stock options	XNone	
12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	X None	
13	financial interests		
	ease summarize the above c	onflict of interest in the fo	lowing box:

Yo Ma red		t of preoperative body ma opic radical cystectomy w	ss index on perioperative outcomes is optimized by en ith intracorporeal urinary diversion	hanced
rel pa to	ated to the content of your rties whose interests may be	manuscript. "Related" me e affected by the content necessarily indicate a bias	I relationships/activities/interests listed below that are eans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitmen . If you are in doubt about whether to list a o so.	
	e following questions apply anuscript only.	to the author's relationsh	ips/activities/interests as they relate to the <u>current</u>	
to me	the epidemiology of hypertoedication, even if that medication item #1 below, report all su	ension, you should declare cation is not mentioned in pport for the work reporte	defined broadly. For example, if your manuscript perterall relationships with manufacturers of antihypertens the manuscript. ed in this manuscript without time limit. For all other i	sive
the	e time frame for disclosure i	s the past 36 months.		
		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 initia	l planning of the work	
L	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.	XNone		
		Time frame: pas	t 36 months	
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone		
3	Royalties or licenses	XNone		

Consulting fees

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events	V N	
6	Payment for expert	XNone	
	testimony		
7	Support for attending	X None	
/	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	X None	
	Stock of Stock options	XNone	
12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	X None	
13	financial interests		
	ease summarize the above c	onflict of interest in the fo	lowing box:

	te:Feb. 25 th , 2021 ur Name: Wahafu Wasili	- iiiang		
			ss index on perioperative outcomes is optimized by en	hanced
			ith intracorporeal urinary diversion	
Ma	nuscript number (if known)): TAU-21-171		
rel pa	ated to the content of your rties whose interests may be	manuscript. "Related" me e affected by the content	I relationships/activities/interests listed below that are cans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitmen . If you are in doubt about whether to list a	
rel	ationship/activity/interest,	it is preferable that you do	o so.	
	e following questions apply inuscript only.	to the author's relationsh	ips/activities/interests as they relate to the <u>current</u>	
to		ension, you should declare	defined broadly. For example, if your manuscript perterally relationships with manufacturers of antihypertens the manuscript.	
	item #1 below, report all su e time frame for disclosure i		ed in this manuscript without time limit. For all other in	tems,
		Name all entities with	Specifications/Comments	
		whom you have this	(e.g., if payments were made to you or to your	
		relationship or indicate	institution)	
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		Time frame: Since the initia	Il planning of the work	
1	All support for the present	X None		
_	manuscript (e.g., funding,	XNone		
	provision of study materials,			
	medical writing, article			
	processing charges, etc.) No time limit for this item.			
	No time inincior tins item.			
		Time frame: pas	t 26 manths	
2	Grants or contracts from	X None		
-	any entity (if not indicated			
	in item #1 above).			
3	Royalties or licenses	XNone		

Consulting fees

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events	V N	
6	Payment for expert	XNone	
	testimony		
7	Support for attending	X None	
/	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	X None	
	Stock of Stock options	XNone	
12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	X None	
13	financial interests		
	ease summarize the above c	onflict of interest in the fo	lowing box:

Da	te:Feb. 25 th , 2021	_		
	ur Name: Pan Ai			
		• •	ass index on perioperative outcomes is optimized by enh	anced
		-	rith intracorporeal urinary diversion	
Ma	nuscript number (if known)): TAU-21-171		_
rel pa to	ated to the content of your rties whose interests may be	manuscript. "Related" mo e affected by the content necessarily indicate a bias	Il relationships/activities/interests listed below that are eans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment s. If you are in doubt about whether to list a lo so.	
	e following questions apply inuscript only.	to the author's relationsh	nips/activities/interests as they relate to the <u>current</u>	
			e <u>defined broadly</u> . For example, if your manuscript perta e all relationships with manufacturers of antihypertensiv	
	edication, even if that medic	cation is not mentioned in	the manuscript.	
me In i	edication, even if that medic	pport for the work report is the past 36 months.	ed in this manuscript without time limit. For all other ite	ems,
me In i	edication, even if that medic	pport for the work report is the past 36 months. Name all entities with whom you have this	Specifications/Comments (e.g., if payments were made to you or to your	ems,
me In i	edication, even if that medic	pport for the work report is the past 36 months. Name all entities with whom you have this relationship or indicate	ed in this manuscript without time limit. For all other its Specifications/Comments	ems,
me In i	edication, even if that medic	pport for the work report is the past 36 months. Name all entities with whom you have this relationship or indicate none (add rows as	Specifications/Comments (e.g., if payments were made to you or to your	ems,
me In i	edication, even if that medic	pport for the work report is the past 36 months. Name all entities with whom you have this relationship or indicate	Specifications/Comments (e.g., if payments were made to you or to your institution)	ems,
In i	edication, even if that medic item #1 below, report all su e time frame for disclosure i	pport for the work report is the past 36 months. Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initi	Specifications/Comments (e.g., if payments were made to you or to your institution)	ems,
me In i	edication, even if that medication, even if that medication #1 below, report all support for the present	pport for the work report is the past 36 months. 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)	ems,
In i	edication, even if that medication, even if that medication, even if that medicate item #1 below, report all support for disclosure items. All support for the present manuscript (e.g., funding,	pport for the work report is the past 36 months. Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initi	Specifications/Comments (e.g., if payments were made to you or to your institution)	ems,
In i	edication, even if that medication, even if that medication #1 below, report all support for the present	pport for the work report is the past 36 months. Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initi	Specifications/Comments (e.g., if payments were made to you or to your institution)	ems,
In i	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)	pport for the work report is the past 36 months. Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initi	Specifications/Comments (e.g., if payments were made to you or to your institution)	ems,
In i	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article	pport for the work report is the past 36 months. Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initi	Specifications/Comments (e.g., if payments were made to you or to your institution)	ems,
In i	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)	pport for the work report is the past 36 months. Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initi	Specifications/Comments (e.g., if payments were made to you or to your institution)	ems,
In i	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)	pport for the work report is the past 36 months. Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initi	Specifications/Comments (e.g., if payments were made to you or to your institution)	ems,
In i	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)	pport for the work report is the past 36 months. Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initi	Specifications/Comments (e.g., if payments were made to you or to your institution) al planning of the work	ems,
In i	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)	pport for the work report is the past 36 months. Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initi	Specifications/Comments (e.g., if payments were made to you or to your institution) al planning of the work	ems,
mee Init the	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. Grants or contracts from any entity (if not indicated	pport for the work report is the past 36 months. Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initi XNone	Specifications/Comments (e.g., if payments were made to you or to your institution) al planning of the work	ems,
mee Init the	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.	pport for the work report is the past 36 months. Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initi XNone	Specifications/Comments (e.g., if payments were made to you or to your institution) al planning of the work	ems,

Consulting fees

X__None

4

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events	V N	
6	Payment for expert	XNone	
	testimony		
7	Support for attending	X None	
/	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	X None	
	Stock of Stock options	XNone	
12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	X None	
13	financial interests		
	ease summarize the above c	onflict of interest in the fo	lowing box:

	te:Feb. 25 th , 2021 ur Name: Xiaoguang Zho	-		
			ss index on perioperative outcomes is optimized by enha	anced
			ith intracorporeal urinary diversion	ancea
	anuscript number (if known)	-		
IVIC	andscript humber (ii known)	J 1AU-21-1/1		-
rel pa	ated to the content of your rties whose interests may b	manuscript. "Related" me e affected by the content	Il relationships/activities/interests listed below that are eans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment is. If you are in doubt about whether to list a	
	ationship/activity/interest,	=	-	
	ationship, activity, interest,	it is preferable that you u	o 30.	
	e following questions apply anuscript only.	to the author's relationsh	sips/activities/interests as they relate to the <u>current</u>	
to me	the epidemiology of hypertoedication, even if that medic	ension, you should declare cation is not mentioned in	e <u>defined broadly</u> . For example, if your manuscript pertain e all relationships with manufacturers of antihypertensive the manuscript. ed in this manuscript without time limit. For all other ite	re
	e time frame for disclosure i	-		
•		o and passes menance		
		Name all entities with	Specifications/Comments	
		whom you have this	(e.g., if payments were made to you or to your	
		relationship or indicate	institution)	
		none (add rows as		
		needed)		
		Time frame: Since the initia	al planning of the work	
1	All support for the present	X None		
_	manuscript (e.g., funding,			
	provision of study materials,			
	provision of study materials,			
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	medical writing, article processing charges, etc.)			
	medical writing, article			
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	medical writing, article processing charges, etc.) No time limit for this item.	Time frame: pas	at 36 months	
2	medical writing, article processing charges, etc.) No time limit for this item. Grants or contracts from	Time frame: pas	tt 36 months	
2	medical writing, article processing charges, etc.) No time limit for this item. Grants or contracts from any entity (if not indicated	•	at 36 months	
	medical writing, article processing charges, etc.) No time limit for this item. Grants or contracts from any entity (if not indicated in item #1 above).	XNone	at 36 months	
2	medical writing, article processing charges, etc.) No time limit for this item. Grants or contracts from any entity (if not indicated	•	at 36 months	

Consulting fees

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events	V N	
6	Payment for expert	XNone	
	testimony		
7	Support for attending	X None	
/	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	X None	
	Stock of Stock options	XNone	
12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	X None	
13	financial interests		
	ease summarize the above c	onflict of interest in the fo	lowing box:

Da	te:Feb. 25 th , 2021	_		
Yo	ur Name: Liyan Cui			
Ma	anuscript Title: Impact	t of preoperative body ma	ass index on perioperative outcomes is optimized by en	nhanced
			rith intracorporeal urinary diversion	
Ma	anuscript number (if known): TAU-21-171		
rel pa to	ated to the content of your rties whose interests may b	manuscript. "Related" me e affected by the content necessarily indicate a bias	Ill relationships/activities/interests listed below that a eans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitme s. If you are in doubt about whether to list a lo so.	
	e following questions apply nuscript only.	to the author's relationsh	nips/activities/interests as they relate to the <u>current</u>	
to	-	ension, you should declar	e <u>defined broadly</u> . For example, if your manuscript per e all relationships with manufacturers of antihyperten the manuscript.	
	item #1 below, report all su e time frame for disclosure i		ed in this manuscript without time limit. For all other	items,
		Name all entities with	Specifications/Comments]
		whom you have this	(e.g., if payments were made to you or to your	
		relationship or indicate	institution)	
		none (add rows as		
		needed)		
		Time frame: Since the initi	al planning of the work	
L	All support for the present	X None		
	manuscript (e.g., funding,			1
	provision of study materials,			1
	medical writing, article			1
	processing charges, etc.)			1
	No time limit for this item.			1
				1
		Time frame: pas	at 36 months	
)	Crants or contracts from			
<u> </u>	Grants or contracts from any entity (if not indicated	XNone		1
	in item #1 above).			1
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3

Royalties or licenses

Consulting fees

X_None

5		XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events	V N	
6	Payment for expert	XNone	
	testimony		
7	Support for attending	X None	
/	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	X None	
	Stock of Stock options	XNone	
12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	X None	
13	financial interests		
	ease summarize the above c	onflict of interest in the fol	lowing box:

Da	te:Feb. 25 th , 2021	_		
Yo	ur Name: Liming Song _	_		
Ma	anuscript Title: Impact	t of preoperative body ma	ss index on perioperative outcomes is optimized by en	hanced
			ith intracorporeal urinary diversion	
Ma	anuscript number (if known)): TAU-21-171		
rel pa to	ated to the content of your rties whose interests may b	manuscript. "Related" me e affected by the content necessarily indicate a bias	Il relationships/activities/interests listed below that are ans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitmer . If you are in doubt about whether to list a o so.	
	e following questions apply anuscript only.	to the author's relationsh	ips/activities/interests as they relate to the <u>current</u>	
to		ension, you should declare	e <u>defined broadly</u> . For example, if your manuscript pert e all relationships with manufacturers of antihypertens the manuscript.	
	item #1 below, report all su e time frame for disclosure i		ed in this manuscript without time limit. For all other i	items,
		Name all entities with	Specifications/Comments]
		whom you have this	(e.g., if payments were made to you or to your	
		relationship or indicate	institution)	
		none (add rows as		
		needed)		
		Time frame: Since the initia	al planning of the work	
L	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.			
	No time mint for this item.			
		Time frame: pas	t 36 months	
2	Grants or contracts from	XNone		
	any entity (if not indicated in item #1 above)			

3

Royalties or licenses

Consulting fees

X__None

5		XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events	V N	
6	Payment for expert	XNone	
	testimony		
7	Support for attending	X None	
/	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	X None	
	Stock of Stock options	XNone	
12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	X None	
13	financial interests		
	ease summarize the above c	onflict of interest in the fol	lowing box:

	te:Feb. 25 th , 2021 ur Name: Anshi Wu	-		
Ma red	anuscript Title: Impact	opic radical cystectomy wi	ss index on perioperative outcomes is optimized by enlith intracorporeal urinary diversion	nanced
rel pa to	ated to the content of your rties whose interests may b	manuscript. "Related" me e affected by the content on necessarily indicate a bias.	I relationships/activities/interests listed below that are cans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment . If you are in doubt about whether to list a o so.	
	e following questions apply nuscript only.	to the author's relationsh	ips/activities/interests as they relate to the <u>current</u>	
to		ension, you should declare	defined broadly. For example, if your manuscript pertar all relationships with manufacturers of antihypertensithe manuscript.	
	item #1 below, report all su e time frame for disclosure i	: :	ed in this manuscript without time limit. For all other it	ems,
		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 initia	l planning of the work	
l	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.	XNone		
		Time frame: pas	t 36 months	
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone		
3	Royalties or licenses	XNone		

Consulting fees

5		XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events	V N	
6	Payment for expert	XNone	
	testimony		
7	Support for attending	X None	
/	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	X None	
	Stock of Stock options	XNone	
12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	X None	
13	financial interests		
	ease summarize the above c	onflict of interest in the fol	lowing box:

Yo	te:Feb. 25 th , 2021 ur Name: Nianzeng Xing			
rec		opic radical cystectomy wi	ss index on perioperative outcomes is optimized by enlith intracorporeal urinary diversion	hanced
rel pa to	ated to the content of your rties whose interests may be	manuscript. "Related" me e affected by the content on necessarily indicate a bias.	I relationships/activities/interests listed below that are ans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment . If you are in doubt about whether to list a o so.	
	e following questions apply nnuscript only.	to the author's relationsh	ips/activities/interests as they relate to the <u>current</u>	
to me	the epidemiology of hypertoedication, even if that medication item #1 below, report all su	ension, you should declare ation is not mentioned in pport for the work reporte	defined broadly. For example, if your manuscript pertage all relationships with manufacturers of antihypertensithe manuscript. ed in this manuscript without time limit. For all other it	ive
the	e time frame for disclosure i	s the past 36 months.		
		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 initia	l 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	t 36 months	
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone		
3	Royalties or licenses	XNone		

Consulting fees

5		XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events	V N	
6	Payment for expert	XNone	
	testimony		
7	Support for attending	X None	
/	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	X None	
	Stock of Stock options	XNone	
12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	X None	
13	financial interests		
	ease summarize the above c	onflict of interest in the fol	lowing box:

Da	te:Feb. 25 th , 2021	_		
Yo	ur Name: Yinong Niu			
			ss index on perioperative outcomes is optimized by enh	nanced
			ith intracorporeal urinary diversion	
Ma	nuscript number (if known)): TAU-21-171		_
rela par to	ated to the content of your ties whose interests may be	manuscript. "Related" me e affected by the content necessarily indicate a bias	Il relationships/activities/interests listed below that are eans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment . If you are in doubt about whether to list a o so.	
	e following questions apply nuscript only.	to the author's relationsh	ips/activities/interests as they relate to the <u>current</u>	
to		ension, you should declare	defined broadly. For example, if your manuscript pertal all relationships with manufacturers of antihypertensithe manuscript.	
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	tem #1 below, report all su time frame for disclosure i	· ·	ed in this manuscript without time limit. For all other it	ems,
		Name all entities with	Specifications/Comments	
		whom you have this	(e.g., if payments were made to you or to your	
		relationship or indicate	institution)	
		none (add rows as		
		needed)		
		Time frame: Since the initia	al 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.			
	ito time mine for tins itelli.			
		Time frame: pas	t 36 months	
2	Grants or contracts from	XNone		
	any entity (if not indicated			

in item #1 above).

Consulting fees

Royalties or licenses

X_None

_X__None

3

5		XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events	V N	
6	Payment for expert	XNone	
	testimony		
7	Support for attending	X None	
/	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	X None	
	Stock of Stock options	XNone	
12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	X None	
13	financial interests		
	ease summarize the above c	onflict of interest in the fol	lowing box: