Date:Jul. 28 th , 2023
Your Name:Gechang Cheng
Manuscript Title: Clinical Application of Magnetic Resonance Lymphangiography in the Vascularized Omenta
Lymph Nodes Transfer with or without Lymphaticovenous Anastomosis for Cancer-related Lower Extremity
Lymphedema
Manuscript number (if known): QIMS-22-1443

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) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame. Since the linear	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	XNone	
	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	XNone
	testimony	
7	Company for attacking	V. Nara
7	Support for attending meetings and/or travel	XNone
	meetings and, or traver	
8	Patents planned, issued or	XNone
	pending	
•		W. N.
9	Participation on a Data Safety Monitoring Board or	XNone
	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
	·	
12	Receipt of equipment,	X_None
	materials, drugs, medical writing, gifts or other	
	services	
13	Other financial or non-	XNone
	financial interests	
Ple	ase summarize the above c	onflict of interest in the following box:
	None.	

Date:Jul. 28 th , 2023
Your Name: Yingxing Duan
Manuscript Title: Clinical Application of Magnetic Resonance Lymphangiography in the Vascularized Omental
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3	Royalties or licenses	XNone	

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

Date:Jul. 28 th , 2	023
Your Name: Qin X	iong
Manuscript Title:	_ Clinical Application of Magnetic Resonance Lymphangiography in the Vascularized Omental
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6	Payment for expert testimony	X_None
7	Support for attending meetings and/or travel	XNone
8	Patents planned, issued or pending	XNone
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone
11	Stock or stock options	XNone
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None
13	Other financial or non- financial interests	XNone
Г		onflict of interest in the following box:
	None.	

Date:Jul. 28 th , 2023
Your Name: Wenguang Liu
Manuscript Title: Clinical Application of Magnetic Resonance Lymphangiography in the Vascularized Omental
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3	Royalties or licenses	XNone	

4	Consulting fees	XNone
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone
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7	Support for attending meetings and/or travel	XNone
8	Patents planned, issued or pending	XNone
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone
11	Stock or stock options	XNone
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None
13	Other financial or non- financial interests	XNone
Г		onflict of interest in the following box:
	None.	

Date:Jul. 28 th , 2023	
Your Name: Fang Yu	
Manuscript Title: Clinical Application of Magnetic Resonance Lymphangiography in the Vascularize	d Omental
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7	Support for attending meetings and/or travel	XNone	
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13	Other financial or non- financial interests	XNone	
Г	Please summarize the above conflict of interest in the following box:		
	None.		

Date:Jul. 28 th , 2023	
Your Name: Liming Qing	
Manuscript Title: Clinical	Application of Magnetic Resonance Lymphangiography in the Vascularized Omental
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10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	Stock or stock options	XNone	
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13	Other financial or non- financial interests	XNone	
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Your Name: Panfeng Wu
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3	Royalties or licenses	XNone	

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5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone	
6	Payment for expert testimony	X_None	
7	Support for attending meetings and/or travel	XNone	
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10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	Stock or stock options	XNone	
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13	Other financial or non- financial interests	XNone	
Г	Please summarize the above conflict of interest in the following box:		
	None.		

Date:Jul. 28 th , 2023
Your Name: Liansheng Gong
Manuscript Title: Clinical Application of Magnetic Resonance Lymphangiography in the Vascularized Omental
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3	Royalties or licenses	XNone	

4	Consulting fees	XNone	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone	
6	Payment for expert testimony	X_None	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non- financial interests	XNone	
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Date:Jul. 28 th , 2023
Your Name: Xiaoli Li
Manuscript Title: Clinical Application of Magnetic Resonance Lymphangiography in the Vascularized Omenta
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7	Support for attending meetings and/or travel	XNone
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10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone
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13	Other financial or non- financial interests	XNone
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	None.	

Date:Jul. 28 th , 2023	_
Your Name: Juyu Tang	
Manuscript Title: Clini	cal Application of Magnetic Resonance Lymphangiography in the Vascularized Omental
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