Date:	Nov. 4 th , 2023	
Your Name:	Lu Yang	
Manuscript T	itle: Predicting Epithelia	al Ovarian Cancer Prognosis: Correlation of Post-treatment 18F-FDG PET/CT
•		hydrate Antigen, Human Epididymis Protein Levels with Overall Survival
Manuscript n	number (if known):	OIMS-23-859

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)
		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.	Funding: Health commission combined Science and Technology Project of Chongqing (No. 2020MSXM066)	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	

		V 1	
4	Consulting fees	XNone	
5	Payment or honoraria for	X None	
5	lectures, presentations,	XNone	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
-		V N	
7	Support for attending meetings and/or travel	XNone	
	-		
8	Patents planned, issued or	XNone	
	pending		
0	5 5 .	V N	
9	Participation on a Data Safety Monitoring Board or	XNone	
	Advisory Board		
10	Leadership or fiduciary role	X None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
4.2	D	V N	
12		XNone	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

This work was supported by Health commission combined Science and Technology Project of Chongqing (No. 2020MSXM066).

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

Date:	Nov. 4 th , 2023	
Your Name:	Mengdan Li	
Manuscript T	itle: Predicting Epithelia	Ovarian Cancer Prognosis: Correlation of Post-treatment ¹⁸ F-FDG PET/CT
<u>Metabolic Pa</u>	rameters, Serum Carbol	drate Antigen, Human Epididymis Protein Levels with Overall Survival
Manuscript n	umber (if known):	OIMS-23-859

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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	

		V 1	
4	Consulting fees	XNone	
5	Payment or honoraria for	X None	
5	lectures, presentations,	XNone	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
-		V N	
7	Support for attending meetings and/or travel	XNone	
	-		
8	Patents planned, issued or	XNone	
	pending		
0	5 5 .	V N	
9	Participation on a Data Safety Monitoring Board or	XNone	
	Advisory Board		
10	Leadership or fiduciary role	X None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
4.2	D	V N	
12		XNone	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

This work was supported by Health commission combined Science and Technology Project of Chongqing (No. 2020MSXM066).

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

Date:	Nov. 4 th , 2023
Your Name:	Huan Liang
Manuscript Title: P	redicting Epithelial Ovarian Cancer Prognosis: Correlation of Post-treatment ¹⁸ F-FDG PET/CT
	ters, Serum Carbohydrate Antigen, Human Epididymis Protein Levels with Overall Survival
Manuscript number	r (if known): QIMS-23-859

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		Name all entities with whom you have this	Specifications/Comments (e.g., if payments were made to you or to your
		relationship or indicate none (add rows as	institution)
		needed)	
		Time frame: Since the initial	planning of the work
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		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	

		V 1	
4	Consulting fees	XNone	
5	Payment or honoraria for	X None	
5	lectures, presentations,	XNone	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
-		V N	
7	Support for attending meetings and/or travel	XNone	
	-		
8	Patents planned, issued or	XNone	
	pending		
0	5 5 .	V N	
9	Participation on a Data Safety Monitoring Board or	XNone	
	Advisory Board		
10	Leadership or fiduciary role	X None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
4.2	D	V N	
12		XNone	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

This work was supported by Health commission combined Science and Technology Project of Chongqing (No. 2020MSXM066).

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

Date:	Nov. 4 th , 2023	
Your Name:	Xiaohui Wang	
Manuscript Title	e: Predicting Epithelial	Ovarian Cancer Prognosis: Correlation of Post-treatment ¹⁸ F-FDG PET/CT
•		ydrate Antigen, Human Epididymis Protein Levels with Overall Survival
Manuscript nur	mber (if known):	QIMS-23-859

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2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	

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4	Consulting fees	XNone	
5	Payment or honoraria for	X None	
5	lectures, presentations,	XNone	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
-		V N	
7	Support for attending meetings and/or travel	XNone	
	-		
8	Patents planned, issued or	XNone	
	pending		
0	5 5 .	V N	
9	Participation on a Data Safety Monitoring Board or	XNone	
	Advisory Board		
10	Leadership or fiduciary role	X None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
4.2	D	V N	
12		XNone	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

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

Date:	Nov. 4 th , 2023	
Your Name: _	Lili Guan	
Manuscript Tit	le: Predicting Epithelial	Ovarian Cancer Prognosis: Correlation of Post-treatment 18F-FDG PET/CT
Metabolic Para	ameters, Serum Carboh	drate Antigen, Human Epididymis Protein Levels with Overall Survival
Manuscript nu	mber (if known):	OIMS-23-859

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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated	XNone	
	in item #1 above).		
3	Royalties or licenses	XNone	

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

This work was supported by Health commission combined Science and Technology Project of Chongqing (No. 2020MSXM066).

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

Date:	Nov. 4 th , 2023			
Your Name:	Xingguo Jing			
Manuscript Title: Predicting Epithelial Ovarian Cancer Prognosis: Correlation of Post-treatment 18F-FDG PET/CT				
Metabolic Parameters, Serum Carbohydrate Antigen, Human Epididymis Protein Levels with Overall Survival				
Manuscript nun	nber (if known):	QIMS-23-859		

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		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
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2	Grants or contracts from	XNone	
	any entity (if not indicated in item #1 above).		
3	Royalties or licenses	XNone	

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4	Consulting fees	XNone	
5	Payment or honoraria for	X None	
5	lectures, presentations,	XNone	
	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		
0	5 5 .	V N	
9	Participation on a Data Safety Monitoring Board or	XNone	
	Advisory Board		
10	Leadership or fiduciary role	X None	
10	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
4.2	D	V N	
12	Receipt of equipment,	XNone	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-	XNone	
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