Date: 2021-5-17

Your Name: Peng-Fei Xie

Manuscript Title: Stent-in-stent technique for removal of tracheal stent in patients with severe granulation tissue

hyperplasia

Manuscript number (if known): QIMS-20-719-R1

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

4	Consulting fees	None	
•	consulting rees		
5	Payment or honoraria for	None	
	lectures, presentations, speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
7	Support for attending	None	
	meetings and/or travel		
8	Patents planned, issued or	None	
0	pending	None	
	-		
9	Participation on a Data	None	
	Safety Monitoring Board or		
10	Advisory Board Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid Stock or stock options	None	
11	Stock of Stock options	None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other	None	
	services		
13	Other financial or non-	None	
	financial interests		
Ple	ease summarize the above c	onflict of interest in the fo	allowing box:
	None.		
L			
Ple	ease place an "X" next to the	following statement to in	ndicate your agreement:

Date: 2021-5-17 Your Name: Ying Liu

Manuscript Title: Stent-in-stent technique for removal of tracheal stent in patients with severe granulation tissue

hyperplasia

Manuscript number (if known): QIMS-20-719-R1

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3	Royalties or licenses	None	

4	Consulting fees	None	
7	Consulting rees	None	
5	Payment or honoraria for	None	
	lectures, presentations, speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
7	Support for attending	None	
′	meetings and/or travel	None	
	o ,		
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
5	Safety Monitoring Board or	None	
	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society, committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
40	5		
12	Receipt of equipment, materials, drugs, medical	None	
	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		
Ple	ease summarize the above o	ontlict of interest in the fo	llowing box:
	None.		
Ple	ease place an "X" next to the	e following statement to in	dicate your agreement:

Date: 2021-5-17 Your Name: Yu Qi

Manuscript Title: Stent-in-stent technique for removal of tracheal stent in patients with severe granulation tissue

hyperplasia

Manuscript number (if known): QIMS-20-719-R1

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3	Royalties or licenses	None	

4	Consulting fees	None	
•	consulting rees		
5	Payment or honoraria for	None	
	lectures, presentations, speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
7	Support for attending	None	
	meetings and/or travel		
8	Patents planned, issued or	None	
0	pending	None	
	-		
9	Participation on a Data	None	
	Safety Monitoring Board or		
10	Advisory Board Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid Stock or stock options	None	
11	Stock of Stock options	None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other	None	
	services		
13	Other financial or non-	None	
	financial interests		
Ple	ease summarize the above c	onflict of interest in the fo	allowing box:
	None.		
L			
Ple	ease place an "X" next to the	following statement to in	ndicate your agreement:

Date: 2021-5-17

Your Name: Xiang-Nan Li

Manuscript Title: Stent-in-stent technique for removal of tracheal stent in patients with severe granulation tissue

hyperplasia

Manuscript number (if known): QIMS-20-719-R1

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3	Royalties or licenses	None	

4	Consulting fees	None	
•	consulting rees		
5	Payment or honoraria for	None	
	lectures, presentations, speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
7	Support for attending	None	
	meetings and/or travel		
8	Patents planned, issued or	None	
0	pending	None	
	-		
9	Participation on a Data	None	
	Safety Monitoring Board or		
10	Advisory Board Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid Stock or stock options	None	
11	Stock of Stock options	None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other	None	
	services		
13	Other financial or non-	None	
	financial interests		
Ple	ease summarize the above c	onflict of interest in the fo	allowing box:
	None.		
L			
Ple	ease place an "X" next to the	following statement to in	ndicate your agreement:

Date: 2021-5-17

Your Name: Mei-Pan Yin

Manuscript Title: Stent-in-stent technique for removal of tracheal stent in patients with severe granulation tissue

hyperplasia

Manuscript number (if known): QIMS-20-719-R1

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3	Royalties or licenses	None	

4	Consulting fees	None	
•	consulting rees		
5	Payment or honoraria for	None	
	lectures, presentations, speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
7	Support for attending	None	
	meetings and/or travel		
8	Patents planned, issued or	None	
0	pending	None	
	-		
9	Participation on a Data	None	
	Safety Monitoring Board or		
10	Advisory Board Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid Stock or stock options	None	
11	Stock of Stock options	None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other	None	
	services		
13	Other financial or non-	None	
	financial interests		
Ple	ease summarize the above c	onflict of interest in the fo	allowing box:
	None.		
L			
Ple	ease place an "X" next to the	following statement to in	ndicate your agreement:

Date: 2021-5-17 Your Name: Yue Zhao

Manuscript Title: Stent-in-stent technique for removal of tracheal stent in patients with severe granulation tissue

hyperplasia

Manuscript number (if known): QIMS-20-719-R1

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3	Royalties or licenses	None	

4	Consulting fees	None	
•	consulting rees		
5	Payment or honoraria for	None	
	lectures, presentations, speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
7	Support for attending	None	
	meetings and/or travel		
8	Patents planned, issued or	None	
0	pending	None	
	-		
9	Participation on a Data	None	
	Safety Monitoring Board or		
10	Advisory Board Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid Stock or stock options	None	
11	Stock of Stock options	None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other	None	
	services		
13	Other financial or non-	None	
	financial interests		
Ple	ease summarize the above c	onflict of interest in the fo	allowing box:
	None.		
L			
Ple	ease place an "X" next to the	following statement to in	ndicate your agreement:

Date: 2021-5-17

Your Name: Chun-Xia Li

Manuscript Title: Stent-in-stent technique for removal of tracheal stent in patients with severe granulation tissue

hyperplasia

Manuscript number (if known): QIMS-20-719-R1

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3	Royalties or licenses	None	

4	Consulting fees	None	
•	consulting rees		
5	Payment or honoraria for	None	
	lectures, presentations, speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
7	Support for attending	None	
	meetings and/or travel		
	Determination of investigation	N	
8	Patents planned, issued or pending	None	
	hea6		
9	Participation on a Data	None	
	Safety Monitoring Board or		
10	Advisory Board Leadership or fiduciary role	None	
10	in other board, society,	None	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment, materials, drugs, medical	None	
	writing, gifts or other services		
13	Other financial or non-	None	
	financial interests		
Ple	ease summarize the above c	onflict of interest in the fo	ollowing box:
	None.		
Ple	ease place an "X" next to the	following statement to in	ndicate your agreement:

Date: 2021-5-17 Your Name: Zhen Li

Manuscript Title: Stent-in-stent technique for removal of tracheal stent in patients with severe granulation tissue

hyperplasia

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4	Consulting fees	None	
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	testimony		
7	Support for attending	None	
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8	Patents planned, issued or pending	None	
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9	Participation on a Data	None	
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10	in other board, society,	None	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment, materials, drugs, medical	None	
	writing, gifts or other services		
13	Other financial or non-	None	
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Ple	ease summarize the above c	onflict of interest in the fo	ollowing box:
	None.		
Ple	ease place an "X" next to the	following statement to in	ndicate your agreement:

Date: 2021-5-17 Your Name: Gang Wu

Manuscript Title: Stent-in-stent technique for removal of tracheal stent in patients with severe granulation tissue

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6	Payment for expert	None	
	testimony		
7	Support for attending	None	
	meetings and/or travel		
	Determination of investigation	N	
8	Patents planned, issued or pending	None	
	hea6		
9	Participation on a Data	None	
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10	Advisory Board Leadership or fiduciary role	None	
10	in other board, society,	None	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment, materials, drugs, medical	None	
	writing, gifts or other services		
13	Other financial or non-	None	
	financial interests		
Ple	ease summarize the above c	onflict of interest in the fo	ollowing box:
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