ICMJE DISCLOSURE FORM

Date: February 16th, 2020
Your Name: Bin Hu
Manuscript Title:_Comparison of prognostic factors of esophageal cancer between a Chinese cohort and
the Surveillance, Epidemiology, and End Results (SEER) database: a retrospective cohort study

Manuscript number (if known):_ JGO-22-145_

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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current 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.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

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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	
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	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		
11	group, paid or unpaid	V. None	
11	Stock or stock options	XNone	
12	Receipt of equipment,	X None	
12	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	X None	
	financial interests		
	Please summarize the above conflict of interest in the following box: The author has no conflicts of interest to declare.		

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

 \underline{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: repruary 10 th, 2020
Your Name: Yiyao Zhu
Manuscript Title:_Comparison of prognostic factors of esophageal cancer between a Chinese cohort and
the Surveillance, Epidemiology, and End Results (SEER) database: a retrospective cohort study
Manuscript number (if known): .IGO-22-145

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ICMJE DISCLOSURE FORM

Date: February 16 th, 2020
Your Name: _Xioabo Wu
Manuscript Title:_Comparison of prognostic factors of esophageal cancer between a Chinese cohort an
the Surveillance, Epidemiology, and End Results (SEER) database: a retrospective cohort study
Manuscript number (if known): IGO 22 145

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