		ICMJ	E DISCLOSURE FORM	
Dat	te:2022/4/	<b>/</b> 20		
Υοι	ur Name: Hao	chen Wang		
Ma che	nuscript Title: Study o	n Safety and Efficacy of re reatment of advanced h	gorafenib combined with transcatheter arterial repatocellular carcinoma after first-line targeted ther	apy
rela par to t	ated to the content of your ties 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 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 poso.	
	e following questions apply nuscript only.	to the author's relationshi	ips/activities/interests as they relate to the <u>current</u>	
to t		ension, you should declare	defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive the manuscript.	
	tem #1 below, report all su time frame for disclosure i		ed in this manuscript without time limit. For all other item	s,
		Name all entities with	Specifications/Comments	
		whom you have this relationship or indicate none (add rows as needed)	(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	None		
	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 any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	

5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
-	6		
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or		
	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	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	_None	
	financial interests		

None			

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

		ICMJE DISCL	OSURE FORM	
Da	te: 2022/4/	<b>'20</b>		
Yo	ur Name: Wei	zhong Xiao		_
Ma ch	anuscript Title: Study of emoembolization in the t	on Safety and Efficacy of reatment of advanced h	Regorafenib combined with transcatheter arter epatocellular carcinoma after first-line targeted	
rel pa to	ated to the content of your rties whose interests may b	manuscript. "Related" mea e affected by the content o necessarily indicate a bias.	relationships/activities/interests listed below that are ans any relation with for-profit or not-for-profit third if the manuscript. Disclosure represents a commitmen If you are in doubt about whether to list a so.	
	e following questions apply inuscript only.	to the author's relationshi	ps/activities/interests as they relate to the <u>current</u>	
to	• •	ension, you should declare	defined broadly. For example, if your manuscript perta all relationships with manufacturers of antihypertens the manuscript.	
	item #1 below, report all su e time frame for disclosure i		d 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 none (add rows as needed)	institution)	
		Time frame: Since the initial	planning of the work	
1	All support for the present	None		
	manuscript (e.g., funding,			

		none (add rows as needed)	, and the second
		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.	None	
		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	

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	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or		
	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	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	_None	
	financial interests		

None

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

		ICMJE DISCI	LOSURE FORM	
Da	te:2022/4	/20		
		ijing Han		
Ma ch	enuscript Title: Study emoembolization in the	on Safety and Efficacy of treatment of advanced h	Regorafenib combined with transcatheter arterial epatocellular carcinoma after first-line targeted thera	рy
rel pa to rel	ated to the content of your rties whose interests may be transparency and does not ationship/activity/interest	manuscript. "Related" mea be affected by the content o necessarily indicate a bias. , it is preferable that you do	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 so.  ps/activities/interests as they relate to the current	
to me	the epidemiology of hypertedication, even if that medi	tension, you should declare cation is not mentioned in tupport for the work reporte	defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive the manuscript.  d in this manuscript without time limit. For all other items,	
		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	None		

		relationship or indicate none (add rows as needed)	institution)
		Time frame: Since the initia	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.	None	
		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	

5	Payment or honoraria for	None	
2		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	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or		
	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	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	_None	
	financial interests		

None			

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

# ICMJE DISCLOSURE FORM

		ICIVIJE DISCL	OSURE FURIVI	
Da	te:2022/4/	<sup>7</sup> 20		
Yo	ur Name: Cao	Shasha		
Ma ch	nuscript Title: Study of emoembolization in the t	on Safety and Efficacy of creatment of advanced he	f Regorafenib combined with transcatheter arterial epatocellular carcinoma after first-line targeted the	
rel par to	ated to the content of your rties whose interests may b	manuscript. "Related" mea e affected by the content o necessarily indicate a bias.	relationships/activities/interests listed below that are ans any relation with for-profit or not-for-profit third f the manuscript. Disclosure represents a commitment If you are in doubt about whether to list a so.	
	e following questions apply inuscript only.	to the author's relationship	os/activities/interests as they relate to the <u>current</u>	
to	•	ension, you should declare	defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive he manuscript.	5
	item #1 below, report all su e time frame for disclosure i		d in this manuscript without time limit. For all other item	ıs,
		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 initial	planning of the work	
1	All support for the present	None		
	manuscrint (e.g. funding			

		none (add rows as needed)	
		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.	None	
		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	

5	Payment or honoraria for lectures, presentations,	None	
	speakers bureaus, manuscript writing or educational events		
6	Payment for expert	None	
	testimony		
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or Advisory Board		
10	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,	None	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	_None	
	financial interests		

None			

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

Date:	2022/4/20				
Your Name:	Zhiyuan Zhang				
Manuscript Title: chemoemboliza	E Study on Safety and Ention in the treatment of ad	fficacy of Regorafenib combined with transcatheter arterial vanced hepatocellular carcinoma after first-line targeted there			
related to the cor parties whose int to transparency a	ntent of your manuscript. "Rel terests may be affected by the	lisclose all relationships/activities/interests listed below that are ated" means any relation with for-profit or not-for-profit third content of the manuscript. Disclosure represents a commitment ate a bias. If you are in doubt about whether to list a nat you do so.			
The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u> .					
manuscript only.					
The author's related to the epidemiological	tionships/activities/interests	should be <u>defined broadly</u> . For example, if your manuscript pertains ld declare all relationships with manufacturers of antihypertensive tioned in the manuscript.			
The author's related to the epidemiology medication, even In item #1 below,	tionships/activities/interests of the second	ld declare all relationships with manufacturers of antihypertensive tioned in the manuscript.  k reported in this manuscript without time limit. For all other items,			
The author's related to the epidemiology medication, even In item #1 below,	tionships/activities/interests sogy of hypertension, you shound if that medication is not mented, report all support for the wood or disclosure is the past 36 mo	Id declare all relationships with manufacturers of antihypertensive tioned in the manuscript.  The reported in this manuscript without time limit. For all other items, in this manuscript without time limit. For all other items, in this manuscript with specifications/Comments			
The author's related to the epidemiology medication, even ln item #1 below,	tionships/activities/interests sogy of hypertension, you shound if that medication is not ment, report all support for the wood or disclosure is the past 36 mo	Id declare all relationships with manufacturers of antihypertensive tioned in the manuscript.  The reported in this manuscript without time limit. For all other items, in this.  With Specifications/Comments (e.g., if payments were made to you or to your			
The author's related to the epidemiology medication, even In item #1 below,	tionships/activities/interests on the second of hypertension, you shoun if that medication is not mented, report all support for the world or disclosure is the past 36 mo	Id declare all relationships with manufacturers of antihypertensive tioned in the manuscript.  The reported in this manuscript without time limit. For all other items, in this.  With Specifications/Comments (e.g., if payments were made to you or to your institution)			
The author's related to the epidemiology medication, even In item #1 below,	tionships/activities/interests sogy of hypertension, you shound if that medication is not ment, report all support for the wood or disclosure is the past 36 mo	Id declare all relationships with manufacturers of antihypertensive tioned in the manuscript.  The reported in this manuscript without time limit. For all other items, in this.  With Specifications/Comments (e.g., if payments were made to you or to your institution)			

		whom you have this relationship or indicate none (add rows as needed)	(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.	None	
		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	

5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	None	
ь	testimony	None	
	testimony		
7	Support for attending	None	
•	meetings and/or travel	Tronc	
	G ,		
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or		
	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	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other		
13	services Other financial or non-	None	
13	other financial or non- financial interests	_None	
	illialiciai liiterests		

None			

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

	ICMJ	IE DISCLOSURE FORM
Date:	2022/4/20	
Your Name:	Guang Chen	
Manuscript Tit	:le: Study on Safety and Effi	cacy of Regorafenib combined with transcatheter arterial naced hepatocellular carcinoma after first-line targeted thera
related to the parties whose to transparend relationship/a	content of your manuscript. "Relat interests may be affected by the co cy and does not necessarily indicate ctivity/interest, it is preferable that	close all relationships/activities/interests listed below that are red" means any relation with for-profit or not-for-profit third content of the manuscript. Disclosure represents a commitment e a bias. If you are in doubt about whether to list a t you do so.  ationships/activities/interests as they relate to the current
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to the epidem	• • • • • • • • • • • • • • • • • • • •	ould be <u>defined broadly</u> . For example, if your manuscript pertains declare all relationships with manufacturers of antihypertensive oned in the manuscript.
	ow, report all support for the work e for disclosure is the past 36 mont	reported in this manuscript without time limit. For all other items, hs.
	Name all entities w	vith Specifications/Comments
	whom you have thi	,
	relationship or indi none (add rows as	icate institution)

		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	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.	None	
		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	

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

None			

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

## **ICMJE DISCLOSURE FORM**

Date:	2022/4/20
Your Name:	Yuefeng Hu
Manuscript Title:	Study on Safety and Efficacy of Regorafenib combined with transcatheter arterial
	on in the treatment of advanced hepatocellular carcinoma after first-line targeted therapy (if known):
related to the conte parties whose inter to transparency and	ensparency, we ask you to disclose all relationships/activities/interests listed below that are ent of your manuscript. "Related" means any relation with for-profit or not-for-profit third ests may be affected by the content of the manuscript. Disclosure represents a commitment does not necessarily indicate a bias. If you are in doubt about whether to list a y/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.

		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)
	I	Time frame: Since the initial	planning of the work
1	All support for the present	None	
	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	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	

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

None		

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

## ICMJE DISCLOSURE FORM

Date:	2022/4/20		
Manuscript Title:	Study on Safety an	nd Efficacy of Regorafenib combined with transcatheter arterial	
chemoembolizati	on in the treatment o	f advanced hepatocellular carcinoma after first-line targeted therap	
Manuscript numbe	r (if known):		
related to the conto parties whose intento to transparency and	ent of your manuscript. rests may be affected by	u to disclose all relationships/activities/interests listed below that are "Related" means any relation with for-profit or not-for-profit third y the content of the manuscript. Disclosure represents a commitment ndicate a bias. If you are in doubt about whether to list a ble that you do so.	
The following ques manuscript only.	tions apply to the autho	or's relationships/activities/interests as they relate to the current	

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.

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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)
		Time frame: Since the initial	planning of the work
1	All support for the present	None	
	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	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	

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

None	

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