Date	e:2022/5/3	BO	
You	r Name:Jixue	Zou	
Mar	nuscript Title: Develo	pment of a prognostic	score for recommended TACE candidates with
spo	ntaneous rupture of h	epatocellular carcinor	ma
Mar	nuscript number (if known):	· '	
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		Name all entities with whom you have this relationship or indicate none (add rows as	Specifications/Comments (e.g., if payments were made to you or to your institution)
		needed)	al planning of the work
1	All account for the account	Time frame: Since the initia	al 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.	XNone	
		Time frame: pas	t 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	X None	
	testimony		
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7	Support for attending	XNone	
	meetings and/or travel		
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8	Patents planned, issued or	XNone	
	pending		
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9	Participation on a Data	XNone	
	Safety Monitoring Board or Advisory Board		
10		V. None	
10	Leadership or fiduciary role in other board, society,	XNone	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X None	
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12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	X_None	
	financial interests		
5 1.		. (1) (1)	
Plea	ase summarize the above co	ntlict of interest in the follo	owing box:

None		

Date	e:2022/5/3	80	
	r Name: Jia Y		-
Man	nuscript Title: Develo	pment of a prognostic	score for recommended TACE candidates with
_	ntaneous rupture of h	=	
Man	nuscript number (if known):		-
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		relationship or indicate	institution)
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		needed)	I planning of the work
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1	All support for the present manuscript (e.g., funding,	XNone	
	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		
2	in item #1 above).	V Nove	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	
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5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	X None	
	testimony		
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7	Support for attending	XNone	
	meetings and/or travel		
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8	Patents planned, issued or	XNone	
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9	Participation on a Data	XNone	
	Safety Monitoring Board or Advisory Board		
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10	Leadership or fiduciary role in other board, society,	XNone	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X None	
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12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other		
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13	Other financial or non-	X_None	
	financial interests		
5 1.		. (1) (1)	
Plea	ase summarize the above co	ntlict of interest in the follo	owing box:

None		

Date	e:2022/5/3	80	
You	r Name:Hong	Chen	
Man	uscript Title: Develo	pment of a prognostic	score for recommended TACE candidates with
spo	ntaneous rupture of he	epatocellular carcinon	na
Man	uscript number (if known):		
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		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
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1	All support for the present manuscript (e.g., funding,	XNone	
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
2	Cuanta au acut	Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated	XNone	
	in item #1 above).		
3	Royalties or licenses	X None	
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4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	X None	
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7	Support for attending	XNone	
	meetings and/or travel		
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8	Patents planned, issued or	XNone	
	pending		
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9	Participation on a Data	XNone	
	Safety Monitoring Board or Advisory Board		
10		V. None	
10	Leadership or fiduciary role in other board, society,	XNone	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X None	
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12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	X_None	
	financial interests		
5 1.		. (1) (1)	
Plea	ase summarize the above co	ntlict of interest in the follo	owing box:

None		

Date	e:2022/5/3	80	
You	r Name:Xingl	1ao Zhou	
Mar	nuscript Title: Develo	pment of a prognostic	score for recommended TACE candidates with
	ntaneous rupture of h		
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		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
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		Time frame: Since the initia	l planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)	XNone	
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2	Grants or contracts from	Time frame: past X None	36 Months
2	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	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	X None	
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7	Support for attending	XNone	
	meetings and/or travel		
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8	Patents planned, issued or	XNone	
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9	Participation on a Data	XNone	
	Safety Monitoring Board or Advisory Board		
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10	Leadership or fiduciary role in other board, society,	XNone	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X None	
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12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other		
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13	Other financial or non-	X_None	
	financial interests		
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Plea	ase summarize the above co	ntlict of interest in the follo	owing box:

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Date	e:2022/5/3	80	
You	r Name: Tongo	chun Xue	
Mar	nuscript Title: Develo	pment of a prognostic	score for recommended TACE candidates with
	ntaneous rupture of h		
Mar	nuscript number (if known):		
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		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
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		Time frame: past	36 months
2	Grants or contracts from	X None	
	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	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	X None	
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7	Support for attending	XNone	
	meetings and/or travel		
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8	Patents planned, issued or	XNone	
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9	Participation on a Data	XNone	
	Safety Monitoring Board or Advisory Board		
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10	Leadership or fiduciary role in other board, society,	XNone	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X None	
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12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other		
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13	Other financial or non-	X_None	
	financial interests		
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Plea	ase summarize the above co	ntlict of interest in the follo	owing box:

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Date	e:2022/5/3	80	
You	r Name: Rongs	kin Chen	
Mar	nuscript Title: Develo	pment of a prognostic	score for recommended TACE candidates with
	ntaneous rupture of he		
Mar	nuscript number (if known):		
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to tl	ne epidemiology of hyperte lication, even if that medica	nsion, you should declare ation is not mentioned in t	defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive he manuscript. d in this manuscript without time limit. For all other items,
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		Name all entities with	Specifications/Comments
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	provision of study materials,		
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	No time limit for this item.		
		Time frame: pas	t 36 months
2	Grants or contracts from any entity (if not indicated	XNone	
	in item #1 above).		
3	Royalties or licenses	X None	
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4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
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6	Payment for expert	X None	
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7	Support for attending	XNone	
	meetings and/or travel		
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8	Patents planned, issued or	XNone	
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9	Participation on a Data	XNone	
	Safety Monitoring Board or Advisory Board		
10		V. None	
10	Leadership or fiduciary role in other board, society,	XNone	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X None	
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12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	X_None	
	financial interests		
5 1.		. (1) (1)	
Plea	ase summarize the above co	ntlict of interest in the follo	owing box:

None		

Date	e:2022/5/3	80	
You	r Name: Lan Z	Zhang	
Man	uscript Title: Develo	pment of a prognostic	score for recommended TACE candidates with
spo	ntaneous rupture of he	epatocellular carcinon	na
Mar	uscript number (if known):		
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	em #1 below, report all sup time frame for disclosure is	•	l in this manuscript without time limit. For all other items,
		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
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1	All support for the present	X None	planning of the work
1	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
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2	Grants or contracts from	Time frame: past X None	36 months
2	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	X None	
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4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	X None	
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7	Support for attending	XNone	
	meetings and/or travel		
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8	Patents planned, issued or	XNone	
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9	Participation on a Data	XNone	
	Safety Monitoring Board or Advisory Board		
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10	Leadership or fiduciary role in other board, society,	XNone	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X None	
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12	Receipt of equipment,	XNone	
	materials, drugs, medical		
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13	Other financial or non-	X_None	
	financial interests		
5 1.		. (1) (1)	
Plea	ase summarize the above co	ntlict of interest in the follo	owing box:

None		

Date	e:2022/5/3	80	
Your	Name:Zhen	ggang Ren	
Man	uscript Title: Develo	pment of a prognostic	score for recommended TACE candidates with
spo	ntaneous rupture of h	epatocellular carcinoi	na
Man	uscript number (if known):		
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		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
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		Time frame: pas	t 36 months
2	Grants or contracts from	XNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting for	V. Nana	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	X None	
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7	Support for attending	XNone	
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9	Participation on a Data	XNone	
	Safety Monitoring Board or Advisory Board		
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10	Leadership or fiduciary role in other board, society,	XNone	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X None	
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	materials, drugs, medical		
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	services		
13	Other financial or non-	X_None	
	financial interests		
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