Date: <u>2022.05.23</u>	
Your Name: Xiaoning Chen	
Manuscript Title: Safety and efficacy of indocyanine green tracer fluore	scence technique in laparoscopic radica
gastrectomy for gastric cancer	
Manuscript number (if known):	

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) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution)
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.	<u>√</u> None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	<u>√</u> None	
3	Royalties or licenses	<u>√</u> None	
4	Consulting fees	<u>√</u> None	

5	Payment or honoraria for	<u>√</u> None				
	lectures, presentations,					
	speakers bureaus,					
	manuscript writing or					
	educational events					
6	Payment for expert	<u>√</u> None				
	testimony					
7	Support for attending meetings and/or travel	<u>√</u> None				
8	Patents planned, issued or	<u>√</u> None				
	pending					
9	Participation on a Data	<u>√</u> None				
	Safety Monitoring Board or					
	Advisory Board					
10	Leadership or fiduciary role	<u>√</u> None				
	in other board, society,					
	committee or advocacy group, paid or unpaid					
11	Stock or stock options	<u>√</u> None				
12	Receipt of equipment,	<u>√</u> None				
	materials, drugs, medical					
	writing, gifts or other services					
13	Other financial or non-	√ None				
13	financial interests	<u>v</u> ivone				
	Third Cold Title Cold					
Ple	Please summarize the above conflict of interest in the following box:					

None.			

Date: 2022.05.23	
Your Name: Zhengwei Zhang	
Manuscript Title: Safety and efficacy of indocyar	nine green tracer fluorescence technique in laparoscopic radical
gastrectomy for gastric cancer	
Manuscript number (if known):	

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5	Payment or honoraria for	<u>√</u> None				
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	speakers bureaus,					
	manuscript writing or					
	educational events					
6	Payment for expert	<u>√</u> None				
	testimony					
7	Support for attending meetings and/or travel	<u>√</u> None				
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	pending					
9	Participation on a Data Safety Monitoring Board or	<u>√</u> None				
	Advisory Board					
10	Leadership or fiduciary role	<u>√</u> None				
	in other board, society,					
	ommittee or advocacy roup, paid or unpaid					
11	Stock or stock options	<u>√</u> None				
12	Receipt of equipment,	<u>√</u> None				
	materials, drugs, medical					
	writing, gifts or other services					
13	Other financial or non-	<u>√</u> None				
	financial interests					
Ple	Please summarize the above conflict of interest in the following box:					

None.			

Date: 2022.05.23
our Name: Feng Zhang
Manuscript Title: <u>Safety and efficacy of indocyanine green tracer fluorescence technique in Iaparoscopic radical</u>
astrectomy for gastric cancer
Manuscript number (if known):

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5	Payment or honoraria for	<u>√</u> None				
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	educational events					
6	Payment for expert	<u>√</u> None				
	testimony					
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8	Patents planned, issued or	<u>√</u> None				
	pending					
9	Participation on a Data	<u>√</u> None				
	Safety Monitoring Board or					
	Advisory Board					
10	Leadership or fiduciary role	<u>√</u> None				
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	committee or advocacy group, paid or unpaid					
11	Stock or stock options	<u>√</u> None				
12	Receipt of equipment,	<u>√</u> None				
	materials, drugs, medical					
	writing, gifts or other services					
13	Other financial or non-	√ None				
13	financial interests	<u>v</u> ivone				
	Third Cold Title Cold					
Ple	Please summarize the above conflict of interest in the following box:					

None.			

Date: 2022.05.23	
Your Name: Xuanchen Tao	
Manuscript Title: Safety and efficacy of indocya	anine green tracer fluorescence technique in laparoscopic radica
gastrectomy for gastric cancer	
Manuscript number (if known):	

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4	Consulting fees	<u>√</u> None	

5	Payment or honoraria for	<u>√</u> None				
	lectures, presentations,					
	speakers bureaus,					
	manuscript writing or					
	educational events					
6	Payment for expert	<u>√</u> None				
	testimony					
7	Support for attending meetings and/or travel	<u>√</u> None				
8	Patents planned, issued or	<u>√</u> None				
	pending					
9	Participation on a Data	<u>√</u> None				
	Safety Monitoring Board or					
	Advisory Board					
10	Leadership or fiduciary role	<u>√</u> None				
	in other board, society,					
	committee or advocacy group, paid or unpaid					
11	Stock or stock options	<u>√</u> None				
12	Receipt of equipment,	<u>√</u> None				
	materials, drugs, medical					
	writing, gifts or other services					
13	Other financial or non-	√ None				
13	financial interests	<u>v</u> ivone				
	Third Cold Title Cold					
Ple	Please summarize the above conflict of interest in the following box:					

None.			

Pate: <u>2022.05.23</u>
our Name: Xu Zhang
Manuscript Title: Safety and efficacy of indocyanine green tracer fluorescence technique in laparoscopic radical
astrectomy for gastric cancer
Manuscript number (if known):

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3	Royalties or licenses	<u>√</u> None	
4	Consulting fees	<u>√</u> None	

5	Payment or honoraria for	<u>√</u> None				
	lectures, presentations,					
	speakers bureaus,					
	manuscript writing or					
	educational events					
6	Payment for expert	<u>√</u> None				
	testimony					
7	Support for attending meetings and/or travel	<u>√</u> None				
8	Patents planned, issued or	<u>√</u> None				
	pending					
9	Participation on a Data	<u>√</u> None				
	Safety Monitoring Board or					
	Advisory Board					
10	Leadership or fiduciary role	<u>√</u> None				
	in other board, society,					
	committee or advocacy group, paid or unpaid					
11	Stock or stock options	<u>√</u> None				
12	Receipt of equipment,	<u>√</u> None				
	materials, drugs, medical					
	writing, gifts or other services					
13	Other financial or non-	√ None				
13	financial interests	<u>v</u> ivone				
	Third Cold Title Cold					
Ple	Please summarize the above conflict of interest in the following box:					

None.			

Date: 2022.05.23	
Your Name: Zeyu Sun	
Manuscript Title: Safety and efficacy of indocyanine	green tracer fluorescence technique in laparoscopic radica
gastrectomy for gastric cancer	
Manuscript number (if known):	

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

5	Payment or honoraria for	<u>√</u> None				
	lectures, presentations,					
	speakers bureaus,					
	manuscript writing or					
	educational events					
6	Payment for expert	<u>√</u> None				
	testimony					
7	Support for attending meetings and/or travel	<u>√</u> None				
8	Patents planned, issued or	<u>√</u> None				
	pending					
9	Participation on a Data	<u>√</u> None				
	Safety Monitoring Board or					
	Advisory Board					
10	Leadership or fiduciary role	<u>√</u> None				
	in other board, society,					
	committee or advocacy group, paid or unpaid					
11	Stock or stock options	<u>√</u> None				
12	Receipt of equipment,	<u>√</u> None				
	materials, drugs, medical					
	writing, gifts or other services					
13	Other financial or non-	√ None				
13	financial interests	<u>v</u> ivone				
	Third Cold Title Cold					
Ple	Please summarize the above conflict of interest in the following box:					

None.			

Date: 2022.05.23	
Your Name: Shibo Sun	
Manuscript Title: Safety and efficacy of indocyanine gre	en tracer fluorescence technique in laparoscopic radical
gastrectomy for gastric cancer	
Manuscript number (if known):	

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3	Grants or contracts from any entity (if not indicated in item #1 above). Royalties or licenses	Time frame: past <u>√</u> None <u>√</u> None	36 months
4	Consulting fees	<u>√</u> None	

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

None.			