Date: _	Septe	ember. 24 <sup>th</sup> , 2023
Your N	ame:	Juwan Kim
Manus	cript Titl	e: The Prognostic Value of the Number of Metastatic Lymph Nodes on the Long-term Survival of
<u>Intrahe</u>	patic Ch	olangiocarcinoma Using the SEER Database
Manus	cript nui	mber (if known): _JGO-23-580

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.

		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)
			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: 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	V 81		
6	Payment for expert	XNone		
	testimony			
7	Support for attending	X None		
'	meetings and/or travel			
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			
	group, paid or unpaid			
11	Stock or stock options	XNone		
12		V N		
12	Receipt of equipment,	X_None		
	materials, drugs, medical writing, gifts or other	_		
	services			
13	Other financial or non-	X None		
13	financial interests	XNone		
	maneral meet eses			
Plea	se summarize the above co	nflict of interest in the foll	owing box:	
N	one.			

Date:	Septen	nber. 24 <sup>th</sup> , 2023	
Your Na	me:	Dai Hoon Han	
Manusc	ript Title:	The Prognostic	Value of the Number of Metastatic Lymph Nodes on the Long-term Survival of
<u>Intrahe</u> i	oatic Cho	langiocarcinoma	Using the SEER Database
Manusc	ript num	ber (if known): _	JGO-23-580

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.

		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	XNone	
	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	XNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone		
	lectures, presentations,			
	speakers bureaus,			
	manuscript writing or			
	educational events	V 81		
6	Payment for expert	XNone		
	testimony			
7	Support for attending	X None		
'	meetings and/or travel			
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			
	group, paid or unpaid			
11	Stock or stock options	XNone		
12		V N		
12	Receipt of equipment,	X_None		
	materials, drugs, medical writing, gifts or other	_		
	services			
13	Other financial or non-	X None		
13	financial interests	XNone		
	maneral meet eses			
Plea	se summarize the above co	nflict of interest in the foll	owing box:	
N	one.			

Date: _	Septem	per. 23 <sup>rd</sup> , 2023
Your Na	me:	Gi Hong Choi
Manusc	ript Title:	The Prognostic Value of the Number of Metastatic Lymph Nodes on the Long-term Survival of
Intrahe	patic Chol	ngiocarcinoma Using the SEER Database
Manusc	ript numb	er (if known): _JGO-23-580

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</u> <u>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.

		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 manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  No time limit for this item.	XNone	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	X_None	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone		
	lectures, presentations,			
	speakers bureaus,			
	manuscript writing or			
	educational events	V 81		
6	Payment for expert	XNone		
	testimony			
7	Support for attending	X None		
'	meetings and/or travel			
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			
	group, paid or unpaid			
11	Stock or stock options	XNone		
12		V N		
12	Receipt of equipment,	X_None		
	materials, drugs, medical writing, gifts or other	_		
	services			
13	Other financial or non-	X None		
13	financial interests	XNone		
	maneral meet eses			
Plea	se summarize the above co	nflict of interest in the foll	owing box:	
N	one.			

Date: _	Septen	nber. 24 <sup>th</sup> , 2023	
Your N	ame:	Kyung Sik Kim	
Manus	cript Title	: The Prognostic	Value of the Number of Metastatic Lymph Nodes on the Long-term Survival of
Intrahe	patic Cho	langiocarcinoma	Using the SEER Database
Manus	cript num	ber (if known): _	JGO-23-580

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</u> <u>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.

		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)
		Time traine. Since the initial	platifiling of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article	XNone	
	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).	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	V 81		
6	Payment for expert	XNone		
	testimony			
7	Support for attending	X None		
'	meetings and/or travel			
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			
	group, paid or unpaid			
11	Stock or stock options	XNone		
12		V N		
12	Receipt of equipment,	X_None		
	materials, drugs, medical writing, gifts or other	_		
	services			
13	Other financial or non-	X None		
13	financial interests	XNone		
	maneral meet eses			
Plea	se summarize the above co	nflict of interest in the foll	owing box:	
N	one.			

Date: _	Septen	ber. 24 <sup>th</sup> , 2023
Your Na	ame:	Jin Sub Choi
Manuso	ript Title	The Prognostic Value of the Number of Metastatic Lymph Nodes on the Long-term Survival of
<u>Intrahe</u>	patic Cho	angiocarcinoma Using the SEER Database
Manuso	ript num	er (if known): _JGO-23-580

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.

		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 manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  No time limit for this item.	XNone			
	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	V 81			
6	Payment for expert	XNone			
	testimony				
7	Support for attending	X None			
'	meetings and/or travel				
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				
	group, paid or unpaid				
11	Stock or stock options	XNone			
12		V N			
12	Receipt of equipment,	X_None			
	materials, drugs, medical writing, gifts or other	_			
	services				
13	Other financial or non-	X None			
13	financial interests	XNone			
	maneral meet eses				
Plea	Please summarize the above conflict of interest in the following box:				
N	None.				

Date: _	Se	ptem	ber. 24 <sup>th</sup> , 2023
Your N	ame:		Sung Hyun Kim
Manus	cript	Title:	The Prognostic Value of the Number of Metastatic Lymph Nodes on the Long-term Survival of
<u>Intrahe</u>	patic	Chol	angiocarcinoma Using the SEER Database
Manus	cript	numb	per (if known): _JGO-23-580

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.

		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)
			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: 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				
	group, paid or unpaid				
11	Stock or stock options	XNone			
12	Receipt of equipment,	X_None			
	materials, drugs, medical				
	writing, gifts or other				
	services				
13	Other financial or non-	X None			
	financial interests				
Plea	Please summarize the above conflict of interest in the following box:				
			-		
l N	lone.				