ICMJE DISCLOSURE FORM

| Date: | Dec. 18 th , | 2023 |
|---------------|-------------------------|---|
| Your N | Name: <u>V</u> | inghao Zou |
| Manu | script Title: Po | rineural invasion confers poorer clinical outcomes in patients with T1/T2 intrahepation |
| <u>cholar</u> | ngiocarcinoma | : a single centre, retrospective cohort study |
| Manu | script number | (if known): JGO-23-950 |

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) |
|---|---|---|---|
| | | Time mame. Since the mittal | 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). | X_None | |
| 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 in other board, society, | XNone | | | |
| | | | | | |
| | committee or advocacy group, paid or unpaid | | | | |
| 11 | Stock or stock options | X None | | | |
| | Stock of Stock options | | | | |
| | | | | | |
| 12 | Receipt of equipment, | X_None | | | |
| 12 | materials, drugs, medical | | | | |
| | writing, gifts or other | | | | |
| | services | | | | |
| | | | | | |
| 13 | Other financial or non- | XNone | | | |
| | financial interests | | | | |
| | | | | | |
| Please summarize the above conflict of interest in the following box: | | | | | |
| _ | - | | | | |
| | None. | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Ple | Please place an "X" next to the following statement to indicate your agreement: | | | | |

__X_ I certify that I have answered every question and have not altered the wording of any of the questions on this

form.

| Date: _ | Dec. 18 th , 2023 | | | |
|---|------------------------------------|----------------------------------|--|--|
| Your Na | me: <u>Jie Sheng</u> | | | |
| Manuscr | ipt Title: <u>Perineural invas</u> | ion confers poorer clinical outc | omes in patients with T1/T2 intrahepatic | |
| cholangiocarcinoma: a single centre, retrospective cohort study | | | | |
| Manuscr | ript number (if known): | JGO-23-950 | | |

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|---|---|--|---|
| | | 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). | X_None | |
| 3 | Royalties or licenses | XNone | |
| 4 | Consulting fees | XNone | |

| | | T |
|---|--|--------|
| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events | XNone |
| 6 | Payment for expert testimony | XNone |
| 7 | Support for attending meetings and/or travel | XNone |
| 8 | Patents planned, issued or pending | XNone |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board | XNone |
| 10 | Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid | XNone |
| 11 | Stock or stock options | XNone |
| 12 | Receipt of equipment, materials, drugs, medical writing, gifts or other services | X_None |
| 13 | Other financial or non- financial interests | XNone |
| Please summarize the above conflict of interest in the following box: | | |

| None. | | | |
|-------|--|--|--|
| | | | |

| Date: | Dec. 18 th , 2023 | | |
|--------|---------------------------------------|---|------------|
| Your I | Name: Minghao Ruan | | |
| Manu | script Title: <u>Perineural invas</u> | on confers poorer clinical outcomes in patients with T1/T2 in | trahepatic |
| chola | ngiocarcinoma: a single cent | e, retrospective cohort study | |
| Manu | script number (if known): | JGO-23-950 | |

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| 3 | Royalties or licenses | XNone | |
| 4 | Consulting fees | XNone | |

| | | T |
|---|--|--------|
| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events | XNone |
| 6 | Payment for expert testimony | XNone |
| 7 | Support for attending meetings and/or travel | XNone |
| 8 | Patents planned, issued or pending | XNone |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board | XNone |
| 10 | Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid | XNone |
| 11 | Stock or stock options | XNone |
| 12 | Receipt of equipment, materials, drugs, medical writing, gifts or other services | X_None |
| 13 | Other financial or non- financial interests | XNone |
| Please summarize the above conflict of interest in the following box: | | |

| None. | | | |
|-------|--|--|--|
| | | | |

| Date: <u>Dec. 18th, 2023</u> | |
|---|---|
| Your Name: Wenxuan Zhou | |
| Manuscript Title: Perineural invasion | n confers poorer clinical outcomes in patients with T1/T2 intrahepation |
| cholangiocarcinoma: a single centro | , retrospective cohort study |
| Manuscript number (if known): | JGO-23-950 |

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). | X_None | |
| 3 | Royalties or licenses | XNone | |
| 4 | Consulting fees | XNone | |

| | | T | | |
|-----|--|--------|--|--|
| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events | XNone | | |
| 6 | Payment for expert testimony | XNone | | |
| 7 | Support for attending meetings and/or travel | XNone | | |
| 8 | Patents planned, issued or pending | XNone | | |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board | XNone | | |
| 10 | Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid | XNone | | |
| 11 | Stock or stock options | XNone | | |
| 12 | Receipt of equipment, materials, drugs, medical writing, gifts or other services | X_None | | |
| 13 | Other financial or non- financial interests | XNone | | |
| Ple | Please summarize the above conflict of interest in the following box: | | | |

| None. | | | |
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| | | | |

| Date: | Dec. 18 th | , 2023 | | | | |
|----------|-----------------------|---------------------|-----------------------|-------------------|------------------|------------------|
| Your Na | me: <u> </u> | eiyang Ye | | | | |
| Manusci | ript Title: | Perineural invasi | on confers poorer cli | nical outcomes in | patients with T1 | /T2 intrahepatic |
| cholangi | iocarcinom | na: a single centre | e, retrospective coho | rt study | | |
| Manusci | ript numbe | er (if known): | JGO-23-950 | | · | |

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| 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). | X_None | |
| 3 | Royalties or licenses | XNone | |
| 4 | Consulting fees | XNone | |

| | | T | | |
|-----|--|--------|--|--|
| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events | XNone | | |
| 6 | Payment for expert testimony | XNone | | |
| 7 | Support for attending meetings and/or travel | XNone | | |
| 8 | Patents planned, issued or pending | XNone | | |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board | XNone | | |
| 10 | Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid | XNone | | |
| 11 | Stock or stock options | XNone | | |
| 12 | Receipt of equipment, materials, drugs, medical writing, gifts or other services | X_None | | |
| 13 | Other financial or non- financial interests | XNone | | |
| Ple | Please summarize the above conflict of interest in the following box: | | | |

| None. | | | |
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| Date: | Dec. 18 th , 2023 | |
|----------------|------------------------------|--|
| Your I | Name: <u>Gaowei Yang</u> | |
| Manu | script Title: Perineural in | asion confers poorer clinical outcomes in patients with T1/T2 intrahepatic |
| <u>chola</u> ı | ngiocarcinoma: a single c | ntre, retrospective cohort study |
| Manu | script number (if known) | JGO-23-950 |

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

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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. | XNone | |
| 3 | Grants or contracts from any entity (if not indicated in item #1 above). Royalties or licenses | Time frame: pastXNoneXNone | 36 months |
| 4 | Consulting fees | XNone | |

| | | T | | |
|-----|--|--------|--|--|
| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events | XNone | | |
| 6 | Payment for expert testimony | XNone | | |
| 7 | Support for attending meetings and/or travel | XNone | | |
| 8 | Patents planned, issued or pending | XNone | | |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board | XNone | | |
| 10 | Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid | XNone | | |
| 11 | Stock or stock options | XNone | | |
| 12 | Receipt of equipment, materials, drugs, medical writing, gifts or other services | X_None | | |
| 13 | Other financial or non- financial interests | XNone | | |
| Ple | Please summarize the above conflict of interest in the following box: | | | |

| None. | | | |
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| Date: | Dec. 18 th | 2023 |
|-----------------|-----------------------|--|
| Your Nam | ne: <u>`</u> | e Qian |
| Manuscri | pt Title: | Perineural invasion confers poorer clinical outcomes in patients with T1/T2 intrahepatic |
| cholangio | carcinon | a: a single centre, retrospective cohort study |
| Manuscri | pt numbe | r (if known): JGO-23-950 |

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| 3 | Grants or contracts from any entity (if not indicated in item #1 above). Royalties or licenses | Time frame: pastXNoneXNone | 36 months |
| 4 | Consulting fees | XNone | |

| | | T | | | |
|-----|--|--------|--|--|--|
| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events | XNone | | | |
| 6 | Payment for expert testimony | XNone | | | |
| 7 | Support for attending meetings and/or travel | XNone | | | |
| 8 | Patents planned, issued or pending | XNone | | | |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board | XNone | | | |
| 10 | Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid | XNone | | | |
| 11 | Stock or stock options | XNone | | | |
| 12 | Receipt of equipment, materials, drugs, medical writing, gifts or other services | X_None | | | |
| 13 | Other financial or non- financial interests | XNone | | | |
| Ple | Please summarize the above conflict of interest in the following box: | | | | |

| None. | | | |
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| | | | |

| Date: | Dec. 18 th , 2023 | | | | | |
|---------|------------------------------|-----------------|-------------------|-------------------|---------------|---------------------|
| Your Na | me: <u>Jian Wa</u> | ang | | | | |
| Manusc | ript Title: <u>Perineu</u> | ral invasion co | onfers poorer cli | nical outcomes in | patients with | T1/T2 intrahepation |
| cholang | <u>iocarcinoma: a si</u> | ngle centre, re | trospective coho | ort study | | |
| Manusc | ript number (if kr | iown): | JGO-23-950 | | | |

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| | | Time frame: Since the initial | planning of the work |
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| | | Time frame: past | 36 months |
| 2 | Grants or contracts from any entity (if not indicated in item #1 above). | X_None | |
| 3 | Royalties or licenses | XNone | |
| 4 | Consulting fees | XNone | |

| | | T | | | |
|-----|--|--------|--|--|--|
| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events | XNone | | | |
| 6 | Payment for expert testimony | XNone | | | |
| 7 | Support for attending meetings and/or travel | XNone | | | |
| 8 | Patents planned, issued or pending | XNone | | | |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board | XNone | | | |
| 10 | Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid | XNone | | | |
| 11 | Stock or stock options | XNone | | | |
| 12 | Receipt of equipment, materials, drugs, medical writing, gifts or other services | X_None | | | |
| 13 | Other financial or non- financial interests | XNone | | | |
| Ple | Please summarize the above conflict of interest in the following box: | | | | |

| None. | | | |
|-------|--|--|--|
| | | | |

| Date: <u>Dec. 1</u> | .8 th , 2023 |
|------------------------|--|
| Your Name: | Ruoyu Wang |
| Manuscript Title | e: Perineural invasion confers poorer clinical outcomes in patients with T1/T2 intrahepation |
| <u>cholangiocarcin</u> | oma: a single centre, retrospective cohort study |
| Manuscript nun | nber (if known): JGO-23-950 |

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|---|---|--|---|
| | | 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). | X_None | |
| 3 | Royalties or licenses | XNone | |
| 4 | Consulting fees | XNone | |

| | | T | | | |
|-----|--|--------|--|--|--|
| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events | XNone | | | |
| 6 | Payment for expert testimony | XNone | | | |
| 7 | Support for attending meetings and/or travel | XNone | | | |
| 8 | Patents planned, issued or pending | XNone | | | |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board | XNone | | | |
| 10 | Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid | XNone | | | |
| 11 | Stock or stock options | XNone | | | |
| 12 | Receipt of equipment, materials, drugs, medical writing, gifts or other services | X_None | | | |
| 13 | Other financial or non- financial interests | XNone | | | |
| Ple | Please summarize the above conflict of interest in the following box: | | | | |

| None. | | | |
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| | | | |

| Date: | Dec. 18 th , 2023 | | |
|---------|---------------------------------------|------------------------------|---|
| Your Na | ame: <u>Suiyi Liu</u> | | |
| Manusc | cript Title: <u>Perineural invasi</u> | on confers poorer clinical o | outcomes in patients with T1/T2 intrahepation |
| cholang | <u>giocarcinoma: a single centi</u> | e, retrospective cohort stu | ıdy |
| Manusc | cript number (if known): | JGO-23-950 | |

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| 2 | Grants or contracts from any entity (if not indicated | Time frame: pastXNone | 36 months |
| 3 | in item #1 above). | X None | |
| 3 | Royalties or licenses | XNone | |
| 4 | Consulting fees | XNone | |

| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events | XNone | | | |
|-----|--|--------|--|--|--|
| 6 | Payment for expert testimony | XNone | | | |
| 7 | Support for attending meetings and/or travel | XNone | | | |
| 8 | Patents planned, issued or pending | XNone | | | |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board | XNone | | | |
| 10 | Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid | XNone | | | |
| 11 | Stock or stock options | XNone | | | |
| 12 | Receipt of equipment, materials, drugs, medical writing, gifts or other services | X_None | | | |
| 13 | Other financial or non- financial interests | XNone | | | |
| Ple | Please summarize the above conflict of interest in the following box: | | | | |

| None. | | | |
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| | | | |

| Date: | Dec. 18 th , 2023 | | |
|----------|------------------------------------|------------------------------|---|
| Your Na | me: <u>Hui Liu</u> | | |
| Manusci | ript Title: <u>Perineural inva</u> | sion confers poorer clinical | outcomes in patients with T1/T2 intrahepati |
| cholangi | iocarcinoma: a single cen | tre, retrospective cohort st | udy |
| Manusci | ript number (if known): | JGO-23-950 | |

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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 lectures, presentations, speakers bureaus, manuscript writing or educational events | XNone | | | |
|-----|--|--------|--|--|--|
| 6 | Payment for expert testimony | XNone | | | |
| 7 | Support for attending meetings and/or travel | XNone | | | |
| 8 | Patents planned, issued or pending | XNone | | | |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board | XNone | | | |
| 10 | Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid | XNone | | | |
| 11 | Stock or stock options | XNone | | | |
| 12 | Receipt of equipment, materials, drugs, medical writing, gifts or other services | X_None | | | |
| 13 | Other financial or non- financial interests | XNone | | | |
| Ple | Please summarize the above conflict of interest in the following box: | | | | |

| None. | | | |
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| | | | |