Date:\_\_\_\_Feb. 4<sup>th</sup>, 2022\_\_\_\_ Your Name:\_\_\_Fangfang Guo\_\_ Manuscript Title:\_\_\_\_\_ Clinical outcomes and quantitative CT analysis after bronchoscopic lung volume reduction using valves for advanced emphysema\_\_\_\_ Manuscript number (if known):\_ JTD-21-1734\_\_\_\_\_

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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 manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) <b>No time limit for this item.</b>	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 lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert testimony	XNone 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	

None.

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

Date:\_\_\_\_\_Feb. 4<sup>th</sup>, 2022\_\_\_\_ Your Name:\_\_\_\_Junfang Huang\_\_\_ Manuscript Title:\_\_\_\_\_ Clinical outcomes and quantitative CT analysis after bronchoscopic lung volume reduction using valves for advanced emphysema\_\_\_\_ Manuscript number (if known):\_\_JTD-21-1734\_\_\_\_\_

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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 Payment for expert testimony	XNone 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	

None.

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

Date:\_\_\_\_Feb. 4<sup>th</sup>, 2022\_\_\_\_ Your Name:\_\_\_Yan Hu\_\_ Manuscript Title:\_\_\_\_\_ Clinical outcomes and quantitative CT analysis after bronchoscopic lung volume reduction using valves for advanced emphysema \_\_\_\_ Manuscript number (if known):\_ JTD-21-1734\_\_\_\_\_

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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 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	X_None	
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	

None.

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

Date:\_\_\_\_Feb. 4<sup>th</sup>, 2022\_\_\_\_ Your Name:\_\_\_Jianxing Qiu\_\_ Manuscript Title:\_\_\_\_\_ Clinical outcomes and quantitative CT analysis after bronchoscopic lung volume reduction using valves for advanced emphysema\_\_\_\_ Manuscript number (if known):\_JTD-21-1734\_\_\_\_\_

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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 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	X_None	
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	

None.

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

Date:\_\_\_\_\_Feb. 4<sup>th</sup>, 2022\_\_\_\_ Your Name:\_\_\_\_Hong Zhang\_\_ Manuscript Title:\_\_\_\_\_ Clinical outcomes and quantitative CT analysis after bronchoscopic lung volume reduction using valves for advanced emphysema\_\_\_\_ Manuscript number (if known):\_ JTD-21-1734\_\_\_\_\_

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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.) <b>No time limit for this item.</b>	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 lectures, presentations, speakers bureaus, manuscript writing or educational events 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	X_None	
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	

None.

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

Date:\_\_\_\_Feb. 4<sup>th</sup>, 2022\_\_\_\_ Your Name:\_\_\_Wei Zhang\_\_ Manuscript Title:\_\_\_\_\_ Clinical outcomes and quantitative CT analysis after bronchoscopic lung volume reduction using valves for advanced emphysema\_\_\_\_ Manuscript number (if known):\_JTD-21-1734\_\_\_\_\_

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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 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	X_None	
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	

None.

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

Date:\_\_\_\_Feb. 4<sup>th</sup>, 2022\_\_\_\_ Your Name:\_\_\_Yuan Cheng\_\_ Manuscript Title:\_\_\_\_\_ Clinical outcomes and quantitative CT analysis after bronchoscopic lung volume reduction using valves for advanced emphysema\_\_\_\_ Manuscript number (if known):\_ JTD-21-1734\_\_\_\_\_

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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	X_None	
4	Consulting fees	XNone	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events 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	

None.

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

Date:\_\_\_\_Feb. 4<sup>th</sup>, 2022\_\_\_\_ Your Name:\_\_\_Jiping Liao\_\_ Manuscript Title:\_\_\_\_\_ Clinical outcomes and quantitative CT analysis after bronchoscopic lung volume reduction using valves for advanced emphysema\_\_\_\_ Manuscript number (if known):\_JTD-21-1734\_\_\_\_\_

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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) planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) <b>No time limit for this item.</b>	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
-	Deverant and an energia fam	V. Name
5	Payment or honoraria for lectures, presentations,	XNone
	speakers bureaus,	
	manuscript writing or	
	educational events	
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	X None
10	in other board, society,	
	committee or advocacy	
	group, paid or unpaid	
11	Stock or stock options	XNone
12	Receipt of equipment,	X None
12	materials, drugs, medical	
	writing, gifts or other	
	services	
13	Other financial or non-	XNone
	financial interests	

None.

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Date:\_\_\_\_\_Feb. 5<sup>th</sup>, 2022\_\_\_\_ Your Name:\_\_\_\_Guangfa Wang\_\_\_ Manuscript Title:\_\_\_\_\_ Clinical outcomes and quantitative CT analysis after bronchoscopic lung volume reduction using valves for advanced emphysema\_\_\_\_ Manuscript number (if known):\_ JTD-21-1734\_\_\_\_\_

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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 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	

None.

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