Date:	_2022/1/30
Your Name:	Benjie Cai
	Efficacy and safety of video-assisted thoracoscopic surgery and thoracotomy in the ary hydatid disease in the Tibetan Plateau: a retrospective study f 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)	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	XNone	
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		Time frame: past	36 months
2	Grants or contracts from	XNone	
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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5		XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	X None	
0	testimony	XNone	
	,		
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	X_None	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	X None	
	'		
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	XNone	
	financial interests	_	
		_	

None		

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

Date:	2022/5/24	
Your Name:	Chao Li	
Manuscript Title:	Efficacy and s	afety of video-assisted thoracoscopic surgery and thoracotomy in the
treatment of pulmo		ease in the Tibetan Plateau: a retrospective study

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		Time frame: past	36 months
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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5		XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	X None	
0	testimony	XNone	
	,		
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	X_None	
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11	Stock or stock options	X None	
	'		
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	XNone	
	financial interests	_	
		_	

None		

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

Date:	2022/5/24	
Your Name:	Zhui Luo	
Manuscript Title:	Efficacy and safe	ety of video-assisted thoracoscopic surgery and thoracotomy in the
•	onary hydatid disea r (if known):	se in the Tibetan Plateau: a retrospective study
related to the conto	ent of your manuscrip	you to disclose all relationships/activities/interests listed below that are pt. "Related" means any relation with for-profit or not-for-profit third
to transparency and	d does not necessaril	by the content of the manuscript. Disclosure represents a commitment y indicate a bias. If you are in doubt about whether to list a rable 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>.

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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		XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	X None	
0	testimony	XNone	
	,		
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	X_None	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	X None	
	'		
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	XNone	
	financial interests	_	
		_	

None		

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

Date	e:2022/5/2	24	
	r Name: Dunz		
trea		tid disease in the Tibetan	sted thoracoscopic surgery and thoracotomy in the Plateau: a retrospective study
relat part to tr	ted to the content of your r ies whose interests may be	nanuscript. "Related" mea affected by the content of ecessarily indicate a bias.	relationships/activities/interests listed below that are ns any relation with for-profit or not-for-profit third the manuscript. Disclosure represents a commitment If you are in doubt about whether to list a so.
	following questions apply touscript only.	to the author's relationship	os/activities/interests as they relate to the current
to th		nsion, you should declare a	lefined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive ne manuscript.
	em #1 below, report all sup is, the time frame for disclo	-	l in this manuscript without time limit. For all other
		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)
		none (add rows as	
		needed)	
		Time frame: Since the initia	l planning of the work
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.		
	No time illustror this item.		
		- :	26
2	Cuanta au contra eta fue un	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	
3	Noyaitles of ficerises		

4

Consulting fees

X_None

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	X None	
0	testimony	XNone	
	,		
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	X_None	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	X None	
	'		
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	XNone	
	financial interests	_	
		_	

None		

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

Date:			
	Weigang Guo		
Manuscript Title: treatment of pulmo	Efficacy and safety of video-assisted thoracoscopic surgery and thoracotomy in the nonary hydatid disease in the Tibetan Plateau: a retrospective study er (if known):		
related to the conte parties whose inter to transparency and	ensparency, we ask you to disclose all relationships/activities/interests listed below that are ent of your manuscript. "Related" means any relation with for-profit or not-for-profit third ests may be affected by the content of the manuscript. Disclosure represents a commitment does not necessarily indicate a bias. If you are in doubt about whether to list a y/interest, it is preferable that you do so.		
The following quest	ions apply to the author's relationships/activities/interests as they relate to the current		

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4	Consulting fees	XNone	

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	manuscript writing or educational events		
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0	testimony	XNone	
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7	Support for attending meetings and/or travel	XNone	
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9	Participation on a Data	XNone	
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	Advisory Board		
10	Leadership or fiduciary role	X_None	
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	'		
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	XNone	
	financial interests	_	
		_	

None		

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

Date:	2022/5/24	
Your Name:	Jia Huang	
Manuscript Title:	Efficacy and safe	ty of video-assisted thoracoscopic surgery and thoracotomy in the
•	, ,	e in the Tibetan Plateau: a retrospective study
•		

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7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
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10	Leadership or fiduciary role	X_None	
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12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	XNone	
	financial interests	_	
		_	

None		

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

Date	e:2022/5/2	4			
	our Name: Qingda Dawa				
trea	Manuscript Title: Efficacy and safety of video-assisted thoracoscopic surgery and thoracotomy in the reatment of pulmonary hydatid disease in the Tibetan Plateau: a retrospective study Manuscript number (if known):				
rela part to ti	ted to the content of your n ies whose interests may be	nanuscript. "Related" mear affected by the content of ecessarily indicate a bias.	relationships/activities/interests listed below that are any relation with for-profit or not-for-profit third the manuscript. Disclosure represents a commitment of you are in doubt about whether to list a so.		
	following questions apply touscript only.	o the author's relationship	s/activities/interests as they relate to the <u>current</u>		
to tl		nsion, you should declare a	efined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive manuscript.		
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	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).				

Royalties or licenses

Consulting fees

4

X__None

X__None

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	X None	
0	testimony	XNone	
	,		
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,	X_None	
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	X None	
	'		
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non- financial interests	XNone	
		_	
		_	

None		

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