

ICMJE DISCLOSURE FORM

Date: Nov. 16th, 2022

Your Name: Xuan Li

Manuscript Title: Removing Different Number of Regional Lymph Nodes Affects Survival Outcome of Operable Patients with Stage IIA NSCLC (According the 8th Edition Staging)

Manuscript number (if known): JTD-22-1314

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 manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	National Natural Science Foundation of China (No. 81802262)	None
		Shanghai Tenth Hospital's improvement plan for NSFC (No. 04.03.17.032, 04.01.18. 048)	None
Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	

3	Royalties or licenses	None	
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13	Other financial or non-financial interests	None	

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Date: Nov. 16th, 2022

Your Name: Guoshu Li

Manuscript Title: Removing Different Number of Regional Lymph Nodes Affects Survival Outcome of Operable Patients with Stage IIA NSCLC (According the 8th Edition Staging)

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Date: Nov. 16th, 2022

Your Name: Yukun Wang

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Your Name: Min Tan

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Your Name: Changhui Wang

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