Date:\_\_\_\_\_ 2023.4.9\_\_\_

Consulting fees

You	r Name: Weicheng Kon	ıg			
Manuscript Title:Length of stay can predict postoperative survival of patients with lung cancer: a					
	propensity score matching analysis based on National Cancer Database				
-	nuscript number (if known):	<u> </u>			
	, , ,		<del></del>		
In th	ne interest of transparency,	we ask you to disclose all r	elationships/activities/interests listed below that are		
rela	ted to the content of your n	nanuscript. "Related" mear	ns any relation with for-profit or not-for-profit third		
part	ies whose interests may be	affected by the content of	the manuscript. Disclosure represents a commitment		
to t	ransparency and does not no	ecessarily indicate a bias. I	f you are in doubt about whether to list a		
rela	tionship/activity/interest, it	is preferable that you do	50.		
The	following questions apply to	o the author's relationship	s/activities/interests as they relate to the <u>current</u>		
<u>mar</u>	nuscript only.				
The	author's relationships/activ	rities/interests should be <u>d</u>	efined broadly. For example, if your manuscript pertains		
to t	he epidemiology of hyperte	nsion, you should declare a	Ill relationships with manufacturers of antihypertensive		
med	lication, even if that medica	tion is not mentioned in th	ne manuscript.		
In it	em #1 below, report all sup	port for the work reported	in this manuscript without time limit. For all other items,		
the	time frame for disclosure is	the past 36 months.			
		Name all entities with	Specifications/Comments		
		whom you have this	(e.g., if payments were made to you or to your		
		relationship or indicate none (add rows as	institution)		
		needed)			
		Time frame: Since the initial	planning of the work		
		1			
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.				
		<b>-</b> : .			
2		Time frame: past	36 Months		
2	Grants or contracts from	XNone			
	any entity (if not indicated				
3	in item #1 above). Royalties or licenses	X None			
3	noyalties of licelises	XNone			

X None

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	X None		
	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	ase summarize the above co	nflict of interest in the foll	owing box:	
l N	lone.			

Date:\_\_\_\_\_ 2023.4.9\_\_\_\_

in item #1 above).

Consulting fees

Royalties or licenses

X\_\_None

\_X\_\_None

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Your Name:\_\_\_ Haoran Wang\_\_

pro	nuscript Title:Length on pensity score matching an uscript number (if known):	nalysis based on Nation	perative survival of patients with lung cancer: a hal Cancer Database
rela part to t	ted to the content of your miles 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 to nuscript only.	o the author's relationship	os/activities/interests as they relate to the <u>current</u>
to t		nsion, you should declare	defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive the manuscript.
	em #1 below, report all sup time frame for disclosure is		I in this manuscript without time limit. For all other items,
		Name all entities with	Specifications/Comments
		whom you have this relationship or indicate	(e.g., if payments were made to you or to your
		none (add rows as	institution)
		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.		
		Time frame: past	: 36 months
2	Grants or contracts from	XNone	
	any entity (if not indicated		

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	X None		
	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	ase summarize the above co	nflict of interest in the foll	owing box:	
l N	lone.			

Date:\_\_\_\_2023.4.9\_

Grants or contracts from

in item #1 above).

Consulting fees

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any entity (if not indicated

Ma pro	Your Name: Yanyan Chen  Manuscript Title: Length of stay can predict postoperative survival of patients with lung cancer: a propensity score matching analysis based on National Cancer Database  Manuscript number (if known): JTD-23-407						
rela par to t	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.						
	following questions apply t nuscript only.	o the author's relationship	os/activities/interests as they relate to the <u>current</u>				
to to	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.  In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.						
		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 initia	l planning of the work				
1	All support for the present	X None					

Time frame: past 36 months

\_X\_\_None

X\_\_None

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5 Payment or honoraria for	XNone	
lectures, presentations,		
speakers bureaus,		
manuscript writing or		
educational events	V. Nana	
6 Payment for expert testimony	XNone	
testimony		
7 Support for attending	X None	
meetings and/or travel		
and the second s		
8 Patents planned, issued or	XNone	
pending		
9 Participation on a Data	X None	
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-	XNone	
financial interests		
Please summarize the above co	onflict of interest in the follow	owing box:
		<b>0</b> 3···
None.		

Date:\_\_\_\_\_ 2023.4.9\_\_\_ Your Name:\_\_\_ Juntao Xie\_\_

Royalties or licenses

Consulting fees

X\_\_None

\_X\_\_None

pro	nuscript Title:Length opensity score matching and script number (if known):	nalysis based on Nation	
rela part to ti	ted to the content of your miles whose interests may be	nanuscript. "Related" mean 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 of you are in doubt about whether to list a so.
	following questions apply to uscript 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.
	em #1 below, report all sup time frame for disclosure is	•	in this manuscript without time limit. For all other items,
		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate none (add rows as needed)	institution)
		Time frame: Since the initial	planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials,	XNone	
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
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2	Crants or contrasts from	Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated	XNone	
	in item #1 above).		

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	X None		
	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	ase summarize the above co	nflict of interest in the foll	owing box:	
l N	lone.			

Date:\_\_\_\_\_ 2023.4.9\_\_\_\_

Royalties or licenses

Consulting fees

X\_\_None

\_X\_\_None

Your Name:\_\_\_ Binhao Huang\_\_

pro	nuscript Title:Length or pensity score matching an uscript number (if known):	nalysis based on Nation	
rela part to ti	ted to the content of your n ies whose interests may be	nanuscript. "Related" mean 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 to nuscript only.	o the author's relationship	s/activities/interests as they relate to the <u>current</u>
to tl	•	nsion, you should declare a	lefined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive me manuscript.
	em #1 below, report all sup time frame for disclosure is	•	in this manuscript without time limit. For all other items,
		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate none (add rows as needed)	institution)
		Time frame: Since the initia	l planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials,	XNone	
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
2		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated	XNone	
	in item #1 above).		

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	X None		
	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			
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13	Other financial or non-	X None		
	financial interests			
Plea	ase summarize the above co	nflict of interest in the foll	owing box:	
l N	lone.			

Date:	_2023.4.9
Your Nam	e: Liang Fang
Manuscrip	ot Title:Length of stay can predict postoperative survival of patients with lung cancer:
propensi	ty score matching analysis based on National Cancer Database
Manuscrip	ot number (if known):JTD-23-407

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.

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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.	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. Nava			
6	Payment for expert testimony	XNone			
	testimony			_	
7	Support for attending	X None		_	
,	meetings and/or travel				
8	Patents planned, issued or	XNone			
	pending				
9	Participation on a Data	X None		Т	
	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-	XNone			
	financial interests				
Ple	Please summarize the above conflict of interest in the following box:				
	ase sammanize the above to				
	None.				
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Date:\_\_\_\_2023.4.9\_\_\_\_

Consulting fees

\_X\_\_None

Your Name:\_\_\_ Wenjuan Chen\_\_

pro	nuscript Title:Length opensity score matching an uscript number (if known):	nalysis based on Nation	
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to the med	ne epidemiology of hyperter lication, even if that medica	nsion, you should declare to the state of th	defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive he manuscript.  If in this manuscript without time limit. For all other items,
		Name all entities with	Specifications/Comments
		whom you have this relationship or indicate none (add rows as needed)	(e.g., if payments were made to you or to your institution)
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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	

5	Payment or honoraria for	XNone			
	lectures, presentations,				
	speakers bureaus,				
	manuscript writing or				
_	educational events	V. Nava			
6	Payment for expert testimony	XNone			
	testimony			_	
7	Support for attending	X None		_	
,	meetings and/or travel				
8	Patents planned, issued or	XNone			
	pending				
9	Participation on a Data	X None		Т	
	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-	XNone			
	financial interests				
Ple	Please summarize the above conflict of interest in the following box:				
	ase sammanize the above to				
	None.				
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Date: 2023.4.9 Your Name: Wei Shao Manuscript Title: Length of stay can predict postoperative survival of patients with lung cancer: a propensity score matching analysis based on National Cancer Database Manuscript number (if known): JTD-23-407
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> .
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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.)  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	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	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
Plea	Please summarize the above conflict of interest in the following box:		
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Date:\_\_\_\_\_ 2023.4.9\_\_\_\_ Your Name:\_\_\_ Jie Zhang\_\_\_

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Royalties or licenses

Consulting fees

\_X\_\_None

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pro	nuscript Title:Length opensity score matching and score matching and script number (if known):	nalysis based on Nation		
rela part to t	ted to the content of your nies whose interests may be	nanuscript. "Related" mea affected by the content of ecessarily indicate a bias.	relationships/activities/interests listed below that are ins any relation with for-profit or not-for-profit third if the manuscript. Disclosure represents a commitment If you are in doubt about whether to list a so.	
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	In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.			
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		needed) Time frame: Since the initia	l 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		
2	Grants or contracts from	Time frame: past X None	t 36 months	
_	any entity (if not indicated in item #1 above).			

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5	Payment or honoraria for	XNone		
	lectures, presentations,			
	speakers bureaus,			
	manuscript writing or			
_	educational events			
6	Payment for expert	X_None		
	testimony			
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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		
	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		
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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		
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Dlos	Please summarize the above conflict of interest in the following box:			
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