

#### **Instructions**

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**Royalties:** Funds are coming in to you or your institution due to your patent

Shuang 1



Section 1. Identifyi	ng Information		
1. Given Name (First Name) Ze-Yu	2. Surname (Last Name) Shuang	3. Date 01-November-2017	
4. Are you the corresponding a	rresponding author? Yes V No Corresponding Author's Name Shengping Li		
5. Manuscript Title The tumor-draining lymph n	odes are immunosuppressed in pat	ients with hepatocellular carcinoma	
6. Manuscript Identifying Numl	oer (if you know it)		
Section 2. The Work	CUnder Consideration for Publ	ication	
	rk (including but not limited to grants, c	m a third party (government, commercial, private foundation, etc.) for data monitoring board, study design, manuscript preparation,	
Section 3. Poloupat			
Relevant	financial activities outside the	submitted work.	
Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were <b>present during the 36 months prior to publication</b> .			
Are there any relevant confli	cts of interest? Yes V No		
Section 4. Intellectu	ıal Property Patents & Copyr	ights	
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo			

Shuang 2



Section 5. Relationships not covered above
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?
Yes, the following relationships/conditions/circumstances are present (explain below):  No other relationships/conditions/circumstances that present a potential conflict of interest
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.
Section 6. Disclosure Statement
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Dr. Shuang has nothing to disclose.

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Mao 1



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Yi-Ze	2. Surname (Last Name) Mao		3. Date 01-November-2017
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Nat	me
5. Manuscript Title The tumor-draining lymph nodes are in	nmunosuppressed in patio	ents with hepatocellular car	cinoma
6. Manuscript Identifying Number (if you kr	now it)		
		_	
Section 2. The Work Under Co	onsideration for Publi	cation	
Did you or your institution <b>at any time</b> receany aspect of the submitted work (including statistical analysis, etc.)?  Are there any relevant conflicts of interesting the state of the submitted work (including statistical analysis, etc.)?	g but not limited to grants, do		
Section 3. Polovant financial	activities outside the	cubmitted work	
Place a check in the appropriate boxes of compensation) with entities as descr clicking the "Add +" box. You should rear there any relevant conflicts of interests.	in the table to indicate wh ibed in the instructions. U port relationships that we	ether you have financial rel se one line for each entity; a	idd as many lines as you need by
Section 4. Intellectual Proper	rty Patents & Copyri	ahts	
Do you have any patents, whether plan			Yes No

Mao 2



Section 5.	
Section 5.	Relationships not covered above
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Liu 1



Section 1. Identifying Inform	mation		
Given Name (First Name)  Yong-Cheng	2. Surname (Last Name) Liu	3. Date 01-November-2017	
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Shengping Li	
5. Manuscript Title The tumor-draining lymph nodes are i	mmunosuppressed in patio	ents with hepatocellular carcinoma	
6. Manuscript Identifying Number (if you k	(now it)		
Section 2. The Work Under G	Consideration for Publi	cation	
Did you or your institution <b>at any time</b> receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?  Are there any relevant conflicts of interest?  Yes  V No			
Section 3. Relevant financia	l activities outside the	submitted work.	
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Do you have any patents, whether plan	nned, pending or issued, b	roadly relevant to the work? Yes V No	

Liu 2



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Lin 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi Guo-He	rst Name)	2. Surname (Last Name) Lin		. Date 11-November-2017
4. Are you the cor	the corresponding author?  Yes  You  Corresponding Author's Name  Shengping Li		2	
5. Manuscript Title The tumor-drain		nmunosuppressed in patio	ents with hepatocellular carcir	noma
6. Manuscript Ider	ntifying Number (if you kr	now it)		
			_	
Section 2.	The Work Under Co	onsideration for Public	cation	
any aspect of the s statistical analysis,	ubmitted work (including	but not limited to grants, da	a third party (government, comr ta monitoring board, study desig	mercial, private foundation, etc.) for gn, manuscript preparation,
Section 3.	Relevant financial	activities outside the s	submitted work.	
of compensation clicking the "Add	) with entities as descri	ibed in the instructions. Us port relationships that wer		ionships (regardless of amount d as many lines as you need by <b>nths prior to publication</b> .
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Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work?	☐ Yes 🗸 No

Lin 2



Section 5.				
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4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Shengping Li	
5. Manuscript Title The tumor-draining lymph nodes are i	mmunosuppressed in patio	ents with hepatocellular carcinoma	
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**Royalties:** Funds are coming in to you or your institution due to your



Section 1.	Identifying Inform	nation	
1. Given Name (Fi Jun	rst Name)	2. Surname (Last Name) Wang	3. Date 01-November-2017
4. Are you the cor	responding author?	☐ Yes ✓ No	Corresponding Author's Name Shengping Li
5. Manuscript Title The tumor-drain		nmunosuppressed in patie	ents with hepatocellular carcinoma
6. Manuscript Ide	ntifying Number (if you kr	now it)	
Section 2.	The Work Under Co	onsideration for Public	cation
Did you or your institution <b>at any time</b> receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?  Are there any relevant conflicts of interest?  Yes  Vo			
	ı		
Section 3.	Relevant financial	activities outside the s	ubmitted work.
of compensation clicking the "Add	n) with entities as descri	ibed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by se present during the 36 months prior to publication.
Section 4.	Intellectual Prope	rty Patents & Copyric	ghts
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No



Section 5. Relationships not covered above
kelationships not covered above
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?
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Dr. Wang has nothing to disclose.

## **Evaluation and Feedback**

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#### **Instructions**

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

# Identifying information.

# The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

### 3. Relevant financial activities outside the submitted work.

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Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

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**Entity:** government agency, foundation, commercial sponsor, academic institution, etc.

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Section 1. Identifying I	nformation	
1. Given Name (First Name) Shengping	2. Surname (Last Name) Li	3. Date 01-November-2017
4. Are you the corresponding autho	r? Yes No	
5. Manuscript Title The tumor-draining lymph nodes are immunosuppressed in patients with hepatocellular carcinoma		
6. Manuscript Identifying Number (i	f you know it)	
Section 2. The Work Un	der Consideration for Publication	
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Do you have any patents, whether	er planned, pending or issued, broadly relev	vant to the work? ☐ Yes 🗸 No

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