Date:	_2021.06.09	<u>)                                    </u>
Your Name	e:_Xiaopir	ng Zuo
Manuscrip	t Title:	Effect and feasibility of uniportal thoracoscopic surgery in the treatment of early-stage
lung cand	er in a pri	mary hospital
Manuscrip	t number (i	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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>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.

		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	

_	<b>D</b>			
5	Payment or honoraria for	XNone		
	lectures, presentations,			
	speakers bureaus,			
	manuscript writing or educational events			
6	Payment for expert	X None		
0	testimony			
	testimony			
7	Support for attending	X None		
,	meetings and/or travel			
	eege aa, e. e.a.e.			
8	Patents planned, issued or	X None		
0	pending	^_NOTIE		
	perioning			
_				
9	Participation on a Data	XNone		
	Safety Monitoring Board or			
10	Advisory Board	V. Name		
10	Leadership or fiduciary role	XNone		
	in other board, society, committee or advocacy			
	group, paid or unpaid			
11		V None		
11	Stock or stock options	XNone		
12	Receipt of equipment,	X_None		
12	materials, drugs, medical			
	writing, gifts or other			
	services			
12	Other financial or non-	V None		
13	Other financial or non- financial interests	XNone		
	illianciai interests			
Plم	ase summarize the above c	onflict of interest in the fo	llowing box:	
	None.			
Pام	ase place an "X" next to the	e following statement to in	dicate your agreement:	

Date:2021.0	5.09			
Your Name:_ <u>Guo</u> i	<u>eng Liu</u>			
Manuscript Title:_	Effect and feasibility of uniportal thoracoscopic surgery in the treatment of early-stage			
ung cancer in a primary hospital				
Manuscript numbe	er (if 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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>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.

		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	

_	<b>D</b>			
5	Payment or honoraria for	XNone		
	lectures, presentations,			
	speakers bureaus,			
	manuscript writing or educational events			
6	Payment for expert	X None		
0	testimony			
	testimony			
7	Support for attending	X None		
,	meetings and/or travel			
	eege aa, e. e.a.e.			
8	Patents planned, issued or	X None		
0	pending	^_NOTIE		
	perioning			
_				
9	Participation on a Data	XNone		
	Safety Monitoring Board or			
10	Advisory Board	V. Name		
10	Leadership or fiduciary role	XNone		
	in other board, society, committee or advocacy			
	group, paid or unpaid			
11		V None		
11	Stock or stock options	XNone		
12	Receipt of equipment,	X_None		
12	materials, drugs, medical			
	writing, gifts or other			
	services			
12	Other financial or non-	V None		
13	Other financial or non- financial interests	XNone		
	illianciai interests			
Plم	ase summarize the above c	onflict of interest in the fo	llowing box:	
	None.			
Pام	ase place an "X" next to the	e following statement to in	dicate your agreement:	

Date:20	<u>21.06.09</u>			
Your Name:_	<u>Xiaochuan Liu</u>			
Manuscript Ti	tle: <u>Effect and feasibility of uniportal thoracoscopic surgery in the treatment of early-stage</u>			
ung cancer in a primary hospital				
Vanuscript number (if 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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>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.

		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	

_	<b>D</b>			
5	Payment or honoraria for	XNone		
	lectures, presentations,			
	speakers bureaus,			
	manuscript writing or educational events			
6	Payment for expert	X None		
0	testimony			
	testimony			
7	Support for attending	X None		
,	meetings and/or travel			
	eege aa, e. e.a.e.			
8	Patents planned, issued or	X None		
0	pending	^_NOTIE		
	perioning			
_				
9	Participation on a Data	XNone		
	Safety Monitoring Board or			
10	Advisory Board	V. Name		
10	Leadership or fiduciary role	XNone		
	in other board, society, committee or advocacy			
	group, paid or unpaid			
11		V None		
11	Stock or stock options	XNone		
12	Receipt of equipment,	X_None		
12	materials, drugs, medical			
	writing, gifts or other			
	services			
12	Other financial or non-	V None		
13	Other financial or non- financial interests	XNone		
	illianciai interests			
Plم	ase summarize the above c	onflict of interest in the fo	llowing box:	
	None.			
Pام	ase place an "X" next to the	e following statement to in	dicate your agreement:	

Date:	_2021.06.2	<u>.9</u>
Your Name	e:_Yongji	an Feng
Manuscrip	t Title: <u>I</u>	<u>Effect and feasibility of uniportal thoracoscopic surgery in the treatment of early-stage</u>
lung canc	er in a pr	imary hospital
Manuscrip	t number (	(if 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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>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.

		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	X None	

_		V N		
5	Payment or honoraria for	XNone		
	lectures, presentations,			
	speakers bureaus,			
	manuscript writing or educational events			
6	Payment for expert	X None		
0	testimony			
	testimony			
7	Support for attending	X None		
,	meetings and/or travel			
	eege aa, e. e.a.e.			
8	Patents planned, issued or	X None		
0	pending			
	pending			
9	Participation on a Data	XNone		
	Safety Monitoring Board or			
10	Advisory Board			
10	Leadership or fiduciary role	XNone		
	in other board, society, committee or advocacy			
	group, paid or unpaid			
11		V. Name		
11	Stock or stock options	XNone		
12	Descint of a minus out	V N		
12	Receipt of equipment,	X_None		
	materials, drugs, medical writing, gifts or other			
	services			
15		V N		
13	Other financial or non-	XNone		
	financial interests			
DIA	ase summarize the above c	anflict of interest in the fo	llowing boy:	
rie	ase summanze the above c	ommet of interest in the 10	mowing nox.	
	None.			
	None.			
DI.	ase place an "X" next to the	following statement to it	adicate vous agreements	

Date:	_2021.06.29	<u>)                                    </u>				
Your Name	e:_Haijun	Zhang				
Manuscrip	t Title:	Effect and feasibility of uniportal thoracoscopic surgery in the treatment of early-stage				
lung cancer in a primary hospital						
Manuscript number (if 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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>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.

		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				
		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	XNone					
	meetings and/or travel						
8	Patents planned, issued or	X None					
J	pending	^					
	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					
12	Receipt of equipment,	X_None					
12	materials, drugs, medical		<u> </u>				
	writing, gifts or other		+				
	services						
13	Other financial or non-	XNone					
	financial interests						
	Please summarize the above conflict of interest in the following box:						
	None.						
DI.	asse place an "Y" poyt to the	o following statement to	indicate your agreement:				