

ICMJE DISCLOSURE FORM

Date: Jun.24th,2022
 Your Name: Zhizhan Ni
 Manuscript Title: Novel Insight on Predicting Prognosis of Gastric Cancer based on Inflammation
 Manuscript number (if known): TCR-22-1042

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 current manuscript only.

The author's relationships/activities/interests should be defined broadly. 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 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.	<u>Zhizhan Ni</u> None	
Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<u>Zhizhan Ni</u> None	
3	Royalties or licenses	<u>Zhizhan Ni</u> None	
4	Consulting fees	<u>Zhizhan Ni</u> None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<u> Zhizhan Ni </u> None	
6	Payment for expert testimony	<u> Zhizhan Ni </u> None	
7	Support for attending meetings and/or travel	<u> Zhizhan Ni </u> None	
8	Patents planned, issued or pending	<u> Zhizhan Ni </u> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<u> Zhizhan Ni </u> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<u> Zhizhan Ni </u> None	
11	Stock or stock options	<u> Zhizhan Ni </u> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<u> Zhizhan Ni </u> None	
13	Other financial or non-financial interests	<u> Zhizhan Ni </u> None	

Please summarize the above conflict of interest in the following box:

None.

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

 Zhizhan Ni I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: Jun.24th,2022
 Your Name: Jiugiang Zhang
 Manuscript Title: Novel Insight on Predicting Prognosis of Gastric Cancer based on Inflammation
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Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<u>Jiugiang Zhang</u> __ None	
3	Royalties or licenses	<u>Jiugiang Zhang</u> __ None	
4	Consulting fees	<u>Jiugiang Zhang</u> __ None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<u>Jiugiang Zhang</u> ___ None	
6	Payment for expert testimony	<u>Jiugiang Zhang</u> ___ None	
7	Support for attending meetings and/or travel	<u>Jiugiang Zhang</u> ___ None	
8	Patents planned, issued or pending	<u>Jiugiang Zhang</u> ___ None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<u>Jiugiang Zhang</u> ___ None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<u>Jiugiang Zhang</u> ___ None	
11	Stock or stock options	<u>Jiugiang Zhang</u> ___ None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<u>Jiugiang Zhang</u> ___ None	
13	Other financial or non-financial interests	<u>Jiugiang Zhang</u> ___ None	

Please summarize the above conflict of interest in the following box:

None.

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

Jiugiang Zhang ___ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: Jun.24th,2022
 Your Name: Chenshen Huang
 Manuscript Title: Novel Insight on Predicting Prognosis of Gastric Cancer based on Inflammation
 Manuscript number (if known): TCR-22-1042

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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.	<u>Chenshen Huang</u>	
		<u>None</u>	
Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<u>Chenshen Huang</u>	
		<u>None</u>	
3	Royalties or licenses	<u>Chenshen Huang</u>	
		<u>None</u>	

4	Consulting fees	<u>Chenshen Huang</u> _None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<u>Chenshen Huang</u> _None	
6	Payment for expert testimony	<u>Chenshen Huang</u> _None	
7	Support for attending meetings and/or travel	<u>Chenshen Huang</u> _None	
8	Patents planned, issued or pending	<u>Chenshen Huang</u> _None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<u>Chenshen Huang</u> _None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<u>Chenshen Huang</u> _None	
11	Stock or stock options	<u>Chenshen Huang</u> _None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<u>Chenshen Huang</u> _None	
13	Other financial or non-financial interests	<u>Chenshen Huang</u> _None	

Please summarize the above conflict of interest in the following box:

None.

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

Chenshen Huang ___ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: Jun.24th,2022
 Your Name: Huahao Xie
 Manuscript Title: Novel Insight on Predicting Prognosis of Gastric Cancer based on Inflammation
 Manuscript number (if known): TCR-22-1042

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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.	<u>Huahao Xie</u> __ None	
Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<u>Huahao Xie</u> __ None	
3	Royalties or licenses	<u>Huahao Xie</u> __ None	
4	Consulting fees	<u>Huahao Xie</u> __ None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<u>Huahao Xie</u> ___ None	
6	Payment for expert testimony	<u>Huahao Xie</u> ___ None	
7	Support for attending meetings and/or travel	<u>Huahao Xie</u> ___ None	
8	Patents planned, issued or pending	<u>Huahao Xie</u> ___ None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<u>Huahao Xie</u> ___ None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<u>Huahao Xie</u> ___ None	
11	Stock or stock options	<u>Huahao Xie</u> ___ None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<u>Huahao Xie</u> ___ None	
13	Other financial or non-financial interests	<u>Huahao Xie</u> ___ None	

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None.

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Huahao Xie ___ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: Jun.24th,2022
 Your Name: Bujun Ge
 Manuscript Title: Novel Insight on Predicting Prognosis of Gastric Cancer based on Inflammation
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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.	<u>Bujun Ge</u> __ None	
Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<u>Bujun Ge</u> __ None	
3	Royalties or licenses	<u>Bujun Ge</u> __ None	
4	Consulting fees	<u>Bujun Ge</u> __ None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<u>Bujun Ge</u> _ None	
6	Payment for expert testimony	<u>Bujun Ge</u> _ None	
7	Support for attending meetings and/or travel	<u>Bujun Ge</u> _ None	
8	Patents planned, issued or pending	<u>Bujun Ge</u> _ None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<u>Bujun Ge</u> _ None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<u>Bujun Ge</u> _ None	
11	Stock or stock options	<u>Bujun Ge</u> _ None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<u>Bujun Ge</u> _ None	
13	Other financial or non-financial interests	<u>Bujun Ge</u> _ None	

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Date: Jun.24th,2022
 Your Name: Qi Huang
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Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<u>Qi Huang</u> __ None	
3	Royalties or licenses	<u>Qi Huang</u> __ None	
4	Consulting fees	<u>Qi Huang</u> __ None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<u>Qi Huang</u> _ None	
6	Payment for expert testimony	<u>Qi Huang</u> _ None	
7	Support for attending meetings and/or travel	<u>Qi Huang</u> _ None	
8	Patents planned, issued or pending	<u>Qi Huang</u> _ None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<u>Qi Huang</u> _ None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<u>Qi Huang</u> _ None	
11	Stock or stock options	<u>Qi Huang</u> _ None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<u>Qi Huang</u> _ None	
13	Other financial or non-financial interests	<u>Qi Huang</u> _ None	

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Qi Huang ___ I certify that I have answered every question and have not altered the wording of any of the questions on this form.