Date:7	//26/22	<del>-</del>		
Your Name:	Liwen Fan			
for thoracoscopic resec	Manuscript Title: The improved success rate and reduced complications of a novel localization device vs. hookwire for thoracoscopic resection of small pulmonary nodules: A single-center, open-label, randomized clinical trial Manuscript number (if known):			
related to the content of parties whose interests to transparency and do	of your manuscript. "Related" mea may be affected by the content o	relationships/activities/interests listed below that are ans 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.		
The following question manuscript only.	s apply to the author's relationshi	ps/activities/interests as they relate to the <u>current</u>		
to the epidemiology of	-	defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive the manuscript.		
•	rt all support for the work reporte losure is the past 36 months.	d 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)		

		whom you have this relationship or indicate none (add rows as needed)	(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		
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		
11	group, paid or unpaid Stock or stock options	X None	
11	Stock of Stock options		
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	XNone	
	financial interests		
Plea	se summarize the above co	nflict of interest in the foll	owing box:

LF has no conflicts of interest to declare.

D-4-	7/40/22	
	e:7/18/22	
Manu for th	r Name: Wenyan Ma nuscript Title: The improved success rate and reduced thoracoscopic resection of small pulmonary nodules: A sin nuscript number (if known):	complications of a novel localization device vs. hookwire gle-center, open-label, randomized clinical trial
relate partie to tra	he interest of transparency, we ask you to disclose all relanted to the content of your manuscript. "Related" means a ties whose interests may be affected by the content of the ransparency and does not necessarily indicate a bias. If you tionship/activity/interest, it is preferable that you do so.	ny relation with for-profit or not-for-profit third manuscript. Disclosure represents a commitment
	following questions apply to the author's relationships/anuscript only.	ctivities/interests as they relate to the <u>current</u>
to th	author's relationships/activities/interests should be <u>defir</u> he epidemiology of hypertension, you should declare all re dication, even if that medication is not mentioned in the m	lationships with manufacturers of antihypertensive
	tem #1 below, report all support for the work reported in t time frame for disclosure is the past 36 months.	his manuscript without time limit. For all other items,
	whom you have this (e	ecifications/Comments g., if payments were made to you or to your stitution)

		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		
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		
11	group, paid or unpaid Stock or stock options	X None	
11	Stock of Stock options		
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	XNone	
	financial interests		
Plea	se summarize the above co	nflict of interest in the foll	owing box:

WM has no conflicts of interest to declare.

Dat	7/18	/22			
Mai for	Your Name: Jie Ma Manuscript Title: The improved success rate and reduced complications of a novel localization device vs. hookwire or thoracoscopic resection of small pulmonary nodules: A single-center, open-label, randomized clinical trial Manuscript number (if known):				
rela part to t	ated to the content of yo ties whose interests may ransparency and does no	our manuscript. "Related" mea y be affected by the content o	relationships/activities/interests listed below that are any relation with for-profit or not-for-profit third f the manuscript. Disclosure represents a commitment If you are in doubt about whether to list a so.		
	following questions app nuscript only.	oly to the author's relationshi	ps/activities/interests as they relate to the <u>current</u>		
to t	he epidemiology of hype	•	defined broadly. For example, if your manuscript pertain all relationships with manufacturers of antihypertensive he manuscript.		
	•	support for the work reported re is the past 36 months.	d in this manuscript without time limit. For all other iten	ns,	
		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)		
		Time frame: Since the initia	al planning of the work		
1	All support for the preser manuscript (e.g., funding	ntXNone			

Time frame: past 36 months

X\_\_None

X\_\_None

\_X\_\_None

provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.

Grants or contracts from any entity (if not indicated

in item #1 above).
Royalties or licenses

Consulting fees

3

4

5 Payment or honoraria fo	rXNone		
lectures, presentations,			
speakers bureaus, manuscript writing or			
educational events			
6 Payment for expert	X None		
testimony			
7 Support for attending meetings and/or travel	XNone		
8 Patents planned, issued	or X_None		
pending			
9 Participation on a Data	X None		
Safety Monitoring Board			
Advisory Board			
10 Leadership or fiduciary re	oleXNone		
in other board, society,			
committee or advocacy group, paid or unpaid			
11 Stock or stock options	XNone		
10 0 11 6			
12 Receipt of equipment,	XNone		
materials, drugs, medica writing, gifts or other	·		
services			
13 Other financial or non-	XNone		
financial interests			
Please summarize the above conflict of interest in the following box:			

JM has no conflicts of interest to declare.

Date:	7/18/22
Your Name:	Longtang Yang
for thoracoscopic re	The improved success rate and reduced complications of a novel localization device vs. hookwire esection of small pulmonary nodules: A single-center, open-label, randomized clinical trial
Manuscript numbe	r (if known):
related to the conte	ensparency, we ask you to disclose all relationships/activities/interests listed below that are ent of your manuscript. "Related" means any relation with for-profit or not-for-profit third

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

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 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,	XNone	
	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		
3	in item #1 above).  Royalties or licenses	X None	
3	Noyalties of licerises	^_NONE	
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 Safety Monitoring Board or	XNone		
	Advisory Board			
10	Leadership or fiduciary role in other board, society,	XNone		
	committee or advocacy			
	group, paid or unpaid			
11	Stock or stock options	XNone		
12	Receipt of equipment,	XNone		
	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:			

LY has no conflicts of	interest to declare.		

Date:	_7/26/22
Your Name:	Zhexin Wang
<b>Manuscript Title</b>	e: A single-center, open-label, prospective, randomized clinical trial of a novel localization device
vs. hookwire fo	r thoracoscopic resection of small pulmonary nodules: improved success rate and reduced complications
Manuscript nur	nber (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 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.	Medical-Engineering Interdisciplinary Research project of Shanghai Jiao Tong University	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	X_None	
4	Consulting fees	X_None	
5		XNone	

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

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

ZW report that this research was funded by the Medical-Engineering Interdisciplinary Research project of Shangha
Jiao Tong University (YG2021QN128).

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

Date	e:	7/18/22			
	Manuscript Title: The improved success rate and reduced complications of a novel localization device vs. hookwi				
	•		-	A single-center, open-label, randomized clinical trial	
iviar	nuscript number (i	r known):		<del></del>	
relat part to tr	ted to the content ies whose interest ransparency and d	of your mats may be a	nuscript. "Related" mea	relationships/activities/interests listed below that are ins any relation with for-profit or not-for-profit third f the manuscript. Disclosure represents a commitment If you are in doubt about whether to list a so.	
	following question	ns apply to	the author's relationship	os/activities/interests as they relate to the current	
to th	ne epidemiology o	f hypertens	-	defined broadly. For example, if your manuscript perta all relationships with manufacturers of antihypertensi he manuscript.	
	•		ort for the work reported ne past 36 months.	d in this manuscript without time limit. For all other it	ems,
			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 initia	al planning of the work	
1	All support for the	present	X None		

Time frame: past 36 months

X\_\_None

X\_\_None

\_X\_\_None

manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.

Grants or contracts from any entity (if not indicated

in item #1 above). Royalties or licenses

Consulting fees

3

4

5	5 Payment or honoraria for lectures, presentations,	XNone	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending	X None	
	meetings and/or travel		
8	Patents planned, issued or	XNone	
	pending		
		. N	
9	Participation on a Data Safety Monitoring Board or	XNone	
	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	
42	Descipt of a suitane set	V. Nava	
12	Receipt of equipment, materials, drugs, medical	XNone	
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
Plea	se summarize the above co	nflict of interest in the foll	owing box:

KX has no conflicts of interest to declare.

	e:7/18/22_				
Mar for t	Tour Name: Yunxuan Jia				
rela part to to	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 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 th	•	nsion, you should declare a	efined broadly. For example, if your manuscript pertain relationships with manufacturers of antihypertensivene manuscript.		
	em #1 below, report all supp time frame for disclosure is	_	in this manuscript without time limit. For all other ite	ms,	
		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 initia	planning of the work		
1	All support for the present	XNone			
	manuscript (e.g., funding,				
	provision of study materials, medical writing, article				

Time frame: past 36 months

X\_\_None

X\_\_None

\_X\_\_None

processing charges, etc.)

No time limit for this item.

Grants or contracts from

in item #1 above).

Consulting fees

Royalties or licenses

3

4

any entity (if not indicated

	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	X None	
	testimony		
	•		
7	Support for attending meetings and/or travel	XNone	
	G ,		
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	
m	Receipt of equipment,	XNone	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

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

YJ has no	conflicts of interest to declare.		

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

Date:	7/26/22	
Your Name:	Beibei Sun	
Manuscript Title:_	The improved suc	cess rate and reduced complications of a novel localization device vs. hookwire
for thoracoscopic	resection of small pulr	nonary nodules: A single-center, open-label, randomized clinical trial
Manuscript numbe	er (if known):	
In the interest of t	ransparency, we ask y	ou to disclose all relationships/activities/interests listed below that are

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.

		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,	XNone	
	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		
3	in item #1 above).  Royalties or licenses	X None	
3	Noyalties of licerises	^_NONE	
4	Consulting fees	XNone	

5	Payment or honoraria for lectures, presentations, speakers bureaus,	XNone		
	manuscript writing or			
	educational events			
6	Payment for expert	XNone		
	testimony			
7	Support for attending	X None		
	meetings and/or travel			
8	Patents planned, issued or	XNone		
	pending			
		. N		
9	Participation on a Data Safety Monitoring Board or	XNone		
	Advisory Board			
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone		
11	Stock or stock options	XNone		
42	Descipt of a suitane set	V. Nava		
12	Receipt of equipment, materials, drugs, medical	XNone		
	writing, gifts or other			
	services			
13	Other financial or non-	XNone		
	financial interests			
Plea	se summarize the above co	nflict of interest in the foll	owing box:	

3S has no conflicts of interest to declare.	

Date:	7/26/22
Your Name:	Jessica C. Sieren
<b>Manuscript Title</b>	: The improved success rate and reduced complications of a novel localization device vs.
hookwire for the	pracoscopic resection of small pulmonary nodules: A single-center, open-label, randomized clinical trial
complications	
Manuscript nun	nber (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).	Noah's Hope and Hope 4 Bridget Grant	Funding to Institution for research unrelated to this work
3	Royalties or licenses	XNone	

4	Consulting fees	XNone	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone	
6	Payment for expert testimony	NIH	NIH study section
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	Stock or stock options	VIDA Diagnostics	Husband has stock options in this company
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	XNone	
13	Other financial or non- financial interests	VIDA Diagnostics	Lung segmentation and analysis software company. Personal payment as my husband is a consultant (and has stock options)

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

JCS received Noah's Hope and Hope 4 Bridget Grant, payment for expert testimony from NIH study section. JCS has a family member that is a shareholder and receives compensation from VIDA Diagnostics, a company commercializing lung image analysis software. This software was not used for this publication.

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

Date:	7/18/22
Your Name:	Haitang Yang
Manuscript Title:	The improved success rate and reduced complications of a novel localization device vs. hookwire
for thoracoscopic r	esection of small pulmonary nodules: A single-center, open-label, randomized clinical trial
Manuscript numbe	r (if known):
	ansparency, we ask you to disclose all relationships/activities/interests listed below that are
	ent of your manuscript. "Related" means any relation with for-profit or not-for-profit third
	ests may be affected by the content of the manuscript. Disclosure represents a commitment
to transparency an	d does not necessarily indicate a bias. If you are in doubt about whether to list a

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

relationship/activity/interest, it is preferable that you do so.

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	XNone	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article processing charges, etc.)		
	No time limit for this item.		
	into time illine for tims term.		
		Time frame: past	36 months
2	Grants or contracts from	X None	30 months
_	any entity (if not indicated		
	in item #1 above).		
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 N			
6	Payment for expert testimony	XNone			
	testimony				
7	Support for attending	X None			
<b>'</b>	meetings and/or travel				
	meetings and, or traver				
8	Patents planned, issued or	X None			
	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				
11	group, paid or unpaid Stock or stock options	X None			
11	Stock of Stock options				
12	Receipt of equipment,	X None			
	materials, drugs, medical				
	writing, gifts or other				
	services				
13	Other financial or non-	XNone			
	financial interests				
Di -					
riea	Please summarize the above conflict of interest in the following box:				

HY has no conflicts of interest to declare.

Date:7/2	6/22
Your Name:	Feng Yao
Manuscript Title:	A single-center, open-label, prospective, randomized clinical trial of a novel localization
device vs. hookwire	for thoracoscopic resection of small pulmonary nodules: improved success rate and reduced
complications	
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 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)
1	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.	Multidisciplinary Collaborative Innovation Project of Shanghai Chest Hospital and the Science and Technology Development Project of Shanghai Municipality (No.19411963900)	
2	2	Grants or contracts from	Time frame: past X None	36 months
		any entity (if not indicated in item #1 above).		
3	3	Royalties or licenses	XNone	

4	Consulting fees	XNone	
5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
6	educational events Payment for expert	X None	
U	testimony	XNone	
7	Support for attending meetings and/or travel	XNone	
	-		
8	Patents planned, issued or	XNone	
	pending		
_			
9	Participation on a Data Safety Monitoring Board or	XNone	
	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	Descript of a major and	V Nana	
12	Receipt of equipment, materials, drugs, medical	XNone	
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

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

FY reports that this research was funded by the Multidisciplinary Collaborative Innovation Project of Shanghai Chest Hospital and the Science and Technology Development Project of Shanghai Municipality (No.19411963900).

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