Date: Octob	Date: October 10, 2021						
Your Name:	Harleen Kaur Chela						
Manuscript 1	Title: Liver injury on admission linked to worse outcomes in COVID-19: An analysis of 14,138 patient						
Manuscript r	number (if known): TGH-21-94						

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

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

No conflict			

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

Date: Octob	Pate: October 10, 2021						
Your Name:	Erin M. Tallon						
Manuscript 1	Fitle: Liver injury on admission linked to worse outcomes in COVID-19: An analysis of 14,138 patients						
Manuscript r	number (if known): TGH-21-94						

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) 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.	_X_None	
2	Grants or contracts from any entity (if not indicated in item #1 above).	Time frame: past _X_None	36 months
3	Royalties or licenses	_X_None	
4	Consulting fees	_X_None	

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

No conflict			

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

Pate: October 10, 2021						
Your Name:	William Baskett					
Manuscript ⁻	Title: Liver injury on admission linked to worse outcomes in COVID-19: An analysis of 14,138 patients					
Manuscript i	number (if known): TGH-21-94					

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) 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.	_X_None	
2	Grants or contracts from any entity (if not indicated in item #1 above).	Time frame: past _X_None	36 months
3	Royalties or licenses	_X_None	
4	Consulting fees	_X_None	

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

No conflict			

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

Date: Octob	er 10, 2021
Your Name:	Karthik Gangu
Manuscript 1	Fitle: Liver injury on admission linked to worse outcomes in COVID-19: An analysis of 14,138 patients
Manuscript i	number (if known): TGH-21-94

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) 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.	_X_None	
3	Grants or contracts from any entity (if not indicated in item #1 above). Royalties or licenses	Time frame: past X None X None	36 months
4	Consulting fees	_X_None	

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

No conflict			

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

Date: Octob	er 10, 2021
Your Name:	Veysel Tahan
Manuscript 1	Title: Liver injury on admission linked to worse outcomes in COVID-19: An analysis of 14,138 patients
Manuscript r	number (if known): TGH-21-94

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	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.	X_None	
2	Grants or contracts from any entity (if not indicated in item #1 above). Royalties or licenses	X_None X_None	36 months
4	Consulting fees	X_None	

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

No conflict			

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

Date: Octob	ate: <u>October 10, 2021</u>										
Your Name:	Ch	i-Ren Sh	ıyu								
Manuscript 1	Title: _	Liver inju	ury on adm	ission linked	to worse	outcomes	in COVID-	19: An	analysis of	14,138	patients
Manuscript i	numbe	r (if kno	wn)· TGH-	21-94							

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	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.	X_None	
2	Grants or contracts from any entity (if not indicated in item #1 above). Royalties or licenses	X_None X_None	36 months
4	Consulting fees	X_None	

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

No conflict			

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

Date: October 10, 2021							
Your Name: _	Ebubekir Daglilar						
Manuscript Ti	tle: Liver injury on admission linked to worse outcomes in COVID-19: An analysis of 14,138 patients						
Manuscript no	umber (if known): TGH-21-94						

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.	_X_None						
		Time frame: past	36 months					
2	Grants or contracts from any entity (if not indicated in item #1 above).	_X_None						
3	Royalties or licenses	_X_None						
4	Consulting fees	_X_None						

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

No conflict			

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