Date:30 MAR 2023

Your Name: Idvaldo Salazar Martins Messias

Manuscript Title: TECHNIQUES, OUTCOMES, AND COMPLICATIONS OF MINIMALLY INVASIVE INGUINAL

LYMPHADENECTOMY IN CANCER OF THE PENIS: AN INTERNATIONAL CLINICAL REVIEW

Manuscript number (if known): AMJ-23-8

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.	XNone	
3	Grants or contracts from any entity (if not indicated in item #1 above).  Royalties or licenses	Time frame: pastXNoneXNone	36 months
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	XNone			
	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			
10					
12	Receipt of equipment,	X_None			
	materials, drugs, medical writing, gifts or other				
	services				
13	Other financial or non-	X None			
13	financial interests				
	manda micrests				
Dlea	so summariza the above so	aflict of interest in the f	allowing hove		
ried	Please summarize the above conflict of interest in the following box:				

No personal or business interest in or potential for personal gain from any of the organizations or projects linked to LigasureTM and scalpel® (Ethicon, CA, USA)/Ligasure® (Covidien, MA, USA) cited in text.	

Date:30 MAR 2023

Your Name: Rene Sotelo

Manuscript Title: TECHNIQUES, OUTCOMES, AND COMPLICATIONS OF MINIMALLY INVASIVE INGUINAL

LYMPHADENECTOMY IN CANCER OF THE PENIS: AN INTERNATIONAL CLINICAL REVIEW

Manuscript number (if known): AMJ-23-8

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).	Time frame: pastXNone	36 months
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	XNone			
	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			
10					
12	Receipt of equipment,	X_None			
	materials, drugs, medical writing, gifts or other				
	services				
13	Other financial or non-	X None			
13	financial interests				
	manda micrests				
Dlea	so summarize the above so	aflict of interest in the f	allowing hove		
ried	Please summarize the above conflict of interest in the following box:				

No personal or business interest in or potential for personal gain from any of the organizations or projects linked to LigasureTM and scalpel® (Ethicon, CA, USA)/Ligasure® (Covidien, MA, USA) cited in text.	

Date:30 MAR 2023

Your Name: David Subirá Rios

Manuscript Title: TECHNIQUES, OUTCOMES, AND COMPLICATIONS OF MINIMALLY INVASIVE INGUINAL

LYMPHADENECTOMY IN CANCER OF THE PENIS: AN INTERNATIONAL CLINICAL REVIEW

Manuscript number (if known): AMJ-23-8

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.	XNone	
3	Grants or contracts from any entity (if not indicated in item #1 above).  Royalties or licenses	Time frame: pastXNoneXNone	36 months
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	XNone			
	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			
10					
12	Receipt of equipment,	X_None			
	materials, drugs, medical writing, gifts or other				
	services				
13	Other financial or non-	X None			
13	financial interests				
	manda micrests				
Dlea	so summarize the above so	aflict of interest in the f	allowing hove		
ried	Please summarize the above conflict of interest in the following box:				

No personal or business interest in or potential for personal gain from any of the organizations or projects linked to LigasureTM and scalpel® (Ethicon, CA, USA)/Ligasure® (Covidien, MA, USA) cited in text.	

Date:30 MAR 2023

Your Name: Saleh Elbalka

Manuscript Title: TECHNIQUES, OUTCOMES, AND COMPLICATIONS OF MINIMALLY INVASIVE INGUINAL

LYMPHADENECTOMY IN CANCER OF THE PENIS: AN INTERNATIONAL CLINICAL REVIEW

Manuscript number (if known): AMJ-23-8

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.	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	XNone			
	meetings and/or travel				
8	Patents planned, issued or	XNone			
	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			
10					
12	Receipt of equipment,	X_None			
	materials, drugs, medical writing, gifts or other				
	services				
13	Other financial or non-	X None			
13	financial interests				
	manda micrests				
Dlea	so summarize the above so	aflict of interest in the f	allowing hove		
ried	Please summarize the above conflict of interest in the following box:				

No personal or business interest in or potential for personal gain from any of the organizations or projects linked to LigasureTM and scalpel® (Ethicon, CA, USA)/Ligasure® (Covidien, MA, USA) cited in text.	

Date:30 MAR 2023

Your Name: Luis Guillermo Medina Navarro

Manuscript Title: TECHNIQUES, OUTCOMES, AND COMPLICATIONS OF MINIMALLY INVASIVE INGUINAL

LYMPHADENECTOMY IN CANCER OF THE PENIS: AN INTERNATIONAL CLINICAL REVIEW

Manuscript number (if known): AMJ-23-8

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	XNone	
	manuscript (e.g., funding,		
	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		
	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				
6	Payment for expert	XNone			
	testimony				
7	Support for attending	XNone			
	meetings and/or travel				
8	Patents planned, issued or	XNone			
	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			
10					
12	Receipt of equipment,	X_None			
	materials, drugs, medical writing, gifts or other				
	services				
13	Other financial or non-	X None			
13	financial interests				
	manda micrests				
Dlea	so summarize the above so	aflict of interest in the f	allowing hove		
ried	Please summarize the above conflict of interest in the following box:				

No personal or business interest in or potential for personal gain from any of the organizations or projects linked to LigasureTM and scalpel® (Ethicon, CA, USA)/Ligasure® (Covidien, MA, USA) cited in text.	

Date:30 MAR 2023

Your Name: Victor Enrique Corona Montes

Manuscript Title: TECHNIQUES, OUTCOMES, AND COMPLICATIONS OF MINIMALLY INVASIVE INGUINAL

LYMPHADENECTOMY IN CANCER OF THE PENIS: AN INTERNATIONAL CLINICAL REVIEW

Manuscript number (if known): AMJ-23-8

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	
3	Grants or contracts from any entity (if not indicated in item #1 above).  Royalties or licenses	Time frame: pastXNoneXNone	36 months
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	XNone			
	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			
10					
12	Receipt of equipment,	X_None			
	materials, drugs, medical writing, gifts or other				
	services				
13	Other financial or non-	X None			
13	financial interests				
	manda micrests				
Dlea	so summarize the above so	aflict of interest in the f	allowing hove		
ried	Please summarize the above conflict of interest in the following box:				

No personal or business interest in or potential for personal gain from any of the organizations or projects linked to LigasureTM and scalpel® (Ethicon, CA, USA)/Ligasure® (Covidien, MA, USA) cited in text.	

Date:30 MAR 2023

Your Name: Aref Samir Sayegh Saba

Manuscript Title: TECHNIQUES, OUTCOMES, AND COMPLICATIONS OF MINIMALLY INVASIVE INGUINAL

LYMPHADENECTOMY IN CANCER OF THE PENIS: AN INTERNATIONAL CLINICAL REVIEW

Manuscript number (if known): AMJ-23-8

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	
3	Grants or contracts from any entity (if not indicated in item #1 above).  Royalties or licenses	Time frame: pastXNoneXNone	36 months
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	XNone			
	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			
10					
12	Receipt of equipment,	X_None			
	materials, drugs, medical writing, gifts or other				
	services				
13	Other financial or non-	X None			
13	financial interests				
	manda micrests				
Dlea	so summarize the above so	aflict of interest in the f	allowing hove		
ried	Please summarize the above conflict of interest in the following box:				

No personal or business interest in or potential for personal gain from any of the organizations or projects linked to LigasureTM and scalpel® (Ethicon, CA, USA)/Ligasure® (Covidien, MA, USA) cited in text.	

Date:30 MAR 2023

Your Name: Alexandre Kyoshi Hidaka

Manuscript Title: TECHNIQUES, OUTCOMES, AND COMPLICATIONS OF MINIMALLY INVASIVE INGUINAL

LYMPHADENECTOMY IN CANCER OF THE PENIS: AN INTERNATIONAL CLINICAL REVIEW

Manuscript number (if known): AMJ-23-8

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 initia	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.	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	XNone			
	meetings and/or travel				
8	Patents planned, issued or	XNone			
	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			
10					
12	Receipt of equipment,	X_None			
	materials, drugs, medical writing, gifts or other				
	services				
13	Other financial or non-	X None			
13	financial interests				
	manda micrests				
Dlea	so summarize the above so	aflict of interest in the f	allowing hove		
ried	Please summarize the above conflict of interest in the following box:				

No personal or business interest in or potential for personal gain from any of the organizations or projects linked to LigasureTM and scalpel® (Ethicon, CA, USA)/Ligasure® (Covidien, MA, USA) cited in text.	

Date:30 MAR 2023

Your Name: Marcos Tobias Machado

Manuscript Title: TECHNIQUES, OUTCOMES, AND COMPLICATIONS OF MINIMALLY INVASIVE INGUINAL

LYMPHADENECTOMY IN CANCER OF THE PENIS: AN INTERNATIONAL CLINICAL REVIEW

Manuscript number (if known): AMJ-23-8

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	XNone					
	manuscript (e.g., funding,						
	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						
	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						
6	Payment for expert	XNone					
	testimony						
7	Support for attending	XNone					
	meetings and/or travel						
8	Patents planned, issued or	XNone					
	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					
4.5							
12	Receipt of equipment,	X_None					
	materials, drugs, medical						
	writing, gifts or other						
12	services Other financial or non-	V None					
13	financial interests	XNone					
	illialiciai liitelests						
ni	Please summarize the above conflict of interest in the following boy:						
Piea	Please summarize the above conflict of interest in the following box:						

No personal or business interest in or potential for personal gain from any of the organizations or projects linked to LigasureTM and scalpel® (Ethicon, CA, USA)/Ligasure® (Covidien, MA, USA) cited in text.				