ICMJE DISCLOSURE FORM

Date:______2021/4/12____________________________________________________________
Your Name:__Ting Qian________________________________________________________
Manuscript Title:___Knockdown of lncRNA TUC338 inhibits esophageal cancer cells migration and invasion
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 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.** | __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, speakers bureaus, manuscript writing or educational events | __X__ None |
| 6 | Payment for expert testimony | __X__ 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 |

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





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

__ X __ 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:______ 2021/4/12

Your Name: __ Hui Zhang

Manuscript Title: __ Knockdown of lncRNA TUC338 inhibits esophageal cancer cells migration and invasion

Manuscript number (if known): ______________________________________________________________

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|      | **No time limit for this item.**                                                          |                                                                                  |                                                  |

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|------|------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|---------------------------|
| 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, speakers bureaus, manuscript writing or educational events | __ X __None |
|---|-------------------------------------------------------------------------------------------------|------------|
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ICMJE DISCLOSURE FORM

Date:____2021/4/12__________________________
Your Name:__Shaorong Yu________________________________________________________
Manuscript Title:___Knockdown of lncRNA TUC338 inhibits esophageal cancer cells migration and invasion
Manuscript number (if known):____________________________________________________

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|   |                                                                                               |                                                                                   |
|   |                                                                                               |                                                                                   |
|   |                                                                                               |                                                                                   |
| 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                                                                           |

Time frame: past 36 months
|   |                                                                                             | _X_ None |
|---|--------------------------------------------------------------------------------------------|---------|
| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events |         |
| 6 | Payment for expert testimony                                                                 | _X_ 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 |

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ICMJE DISCLOSURE FORM

Date: ______ 2021/4/12
Your Name: __ Zhenzhang Chen ________________________________
Manuscript Title: __ Knockdown of IncRNA TUC338 inhibits esophageal cancer cells migration and invasion
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.

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| **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 |
|   | Description                                                                 | Status |
|---|----------------------------------------------------------------------------|--------|
| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events | X None |
| 6 | Payment for expert testimony                                               | X 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 |

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Date:______2021/4/12________________________________________________________
Your Name:__ Hui Jia _______________________________________________________
Manuscript Title:___ Knockdown of IncRNA TUC338 inhibits esophageal cancer cells migration and invasion
Manuscript number (if known):______________________________________________

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|   | **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                                                                        |
|   | Conflict of Interest Description                                                                 | Agreement | Notes |
|---|-------------------------------------------------------------------------------------------------|-----------|-------|
| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events | X         | None  |
| 6 | Payment for expert testimony                                                                   | X         | 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  |

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Date:______2021/4/12______________________________________________________________
Your Name:__ Fanyu Peng _________________________________________________________
Manuscript Title:__ Knockdown of IncRNA TUC338 inhibits esophageal cancer cells migration and invasion
Manuscript number (if known):____________________________________________________

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| 4 | Consulting fees | __ X __None |
|   | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events | _X__ None |
|---|--------------------------------------------------------------------------------------------------|-----------|
| 6 | Payment for expert testimony                                                                    | _X__ 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 |

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Date:______2021/4/12__________________________________________________________
Your Name:__Guochun Cao____________________________________________________
Manuscript Title:___Knockdown of lncRNA TUC338 inhibits esophageal cancer cells migration and invasion
Manuscript number (if known):__________________________________________________

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| 1 |                                                                                   |                                                                                   |
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|   |                                                                                   |                                                                                   |
| 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 |
|   | Description                                                                 |     |
|---|-----------------------------------------------------------------------------|-----|
| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events | __X__ None |
| 6 | Payment for expert testimony                                                | __X__ 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 |
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Date:______2021/4/12__________________________________________________________
Your Name:__Jianwei Lu_____________________________________________________
Manuscript Title:___Knockdown of IncRNA TUC338 inhibits esophageal cancer cells migration and invasion
Manuscript number (if known):________________________________________________

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

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Date:______ 2021/4/12

Your Name:__ Delin Liu ________________________________________________________________

Manuscript Title:__ Knockdown of lncRNA TUC338 inhibits esophageal cancer cells migration and invasion

Manuscript number (if known):____________________________________________________________

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| 3 | Royalties or licenses | __X__None                                                                         |
| 4 | Consulting fees | __X__None                                                                         |
|   | Description                                                                 | Answer |
|---|------------------------------------------------------------------------------|--------|
| 5 | Payment or honoraria for lectures, presentations, speakers bureaus,          | _X__None |
|   | manuscript writing or educational events                                    |        |
| 6 | Payment for expert testimony                                                 | _X__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  | _X__None |
|   | group, paid or unpaid                                                        |        |
|11 | Stock or stock options                                                       | _X__None |
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|   | services                                                                     |        |
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ICMJE DISCLOSURE FORM

Date: ______ 2021/5/26 ________________________________________________________________

Your Name: ______ Dawei Sun __________________________________________________________

Manuscript Title: ___ Knockdown of the expression of lncRNA TUC338 can inhibit the migration and invasion of esophageal cancer cells ___

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.

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|   | No time limit for this item.                                                                  |                                                                                |   |
| 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                                                                      |   |
|   | Time frame: past 36 months                                                                    |                                                                                |   |
|   | Description                                                                 | X | None |
|---|----------------------------------------------------------------------------|----|------|
| 5 | Payment or honoraria for lectures, presentations, speakers bureaus,        | X | None |
|   | manuscript writing or educational events                                   |    |      |
| 6 | Payment for expert testimony                                              | X | 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 |
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|   | services                                                                    |    |      |
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