ICMJE DISCLOSURE FORM

Date: __9-May-2022__________________________
Your Name: __Daixiong Tian__________________________
Manuscript Title: __The prognosis outcomes of autologous fat transfer for breast reconstruction after breast cancer surgery: a systematic review and meta-analysis of cohort studies________________________
Manuscript number (if known):__________________________________________________________________

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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.

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| 1    | All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item. | _X__None                                                                          |                                                                                       |
| 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                                                                          |                                                                                       |

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|------|-------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|----------------------------|
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| 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 |

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Date: _9-May-2022______________________________________________________________
Your Name: __Ying Chu________________________________________________________
Manuscript Title: __The prognosis outcomes of autologous fat transfer for breast reconstruction after breast cancer surgery: a systematic review and meta-analysis of cohort studies_________________________________________
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 |
|   | Description                                                                 |  \( \_X\_\) None |
|---|-----------------------------------------------------------------------------|---------------------|
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| 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 |
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| 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: _9-May-2022______________________________________________________________
Your Name: _Ge Zhang __________________________________________________________
Manuscript Title: __The prognosis outcomes of autologous fat transfer for breast reconstruction after breast cancer surgery: a systematic review and meta-analysis of cohort studies ______________________
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                                                                          |                                                                                  |
|   | Description                                                                 | Agreement | Notes |
|---|-----------------------------------------------------------------------------|-----------|-------|
| 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 |       |
| 12| Receipt of equipment, materials, drugs, medical writing, gifts or other     | __X__None |       |
|   | services                                                                    |           |       |
| 13| Other financial or non-financial interests                                  | _X__None |       |

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Date: 9-May-2022

Your Name: Dan Huang

Manuscript Title: The prognosis outcomes of autologous fat transfer for breast reconstruction after breast cancer surgery: a systematic review and meta-analysis of cohort studies

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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 | |
|   | Conflict of Interest                                                                 | X | None |
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| 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 |
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| 9 | Participation on a Data Safety Monitoring Board or Advisory Board                    | X | None |
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| 13| Other financial or non-financial interests                                            | X | None |

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Date: _9-May-2022____________________________________________________________
Your Name: __ Jialin Huang ___________________________________________________
Manuscript Title: __ The prognosis outcomes of autologous fat transfer for breast reconstruction after breast cancer surgery: a systematic review and meta-analysis of cohort studies __________________________
Manuscript number (if known): __________________________________________________

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Date: __9-May-2022_______________________________________________________________
Your Name: __Jin Zeng___________________________________________________________
Manuscript Title: __The prognosis outcomes of autologous fat transfer for breast reconstruction after breast cancer surgery: a systematic review and meta-analysis of cohort studies___________________________________________
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|   | 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 |
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