ICMJE DISCLOSURE FORM

Date:______________2022/10/14_____________________________________

Your Name:________Hang Zhou_______________________________________________________________________________

Manuscript Title: Analysis of anatomical variation in the right upper lung intersegmental vein V2a based on a 3D reconstruction technique________

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

**Time frame: Since the initial planning of the work**

| 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, 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:

None

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:______________2022/10/14
Your Name:________ Wenwei Wei __________________________________________
Manuscript Title: Analysis of anatomical variation in the right upper lung intersegmental vein V2a based on a 3D reconstruction technique_______
Manuscript number (if known):________________________________________________

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| 3 | Royalties or licenses                                                                         | _X__None                                                                 |
| 4 | Consulting fees                                                                              | _X__None                                                                 |
|   | **Time frame: past 36 months**                                                               |                                                                                   |
|   | **Conflict of Interest**                                                                 |   |
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|13 | Other financial or non-financial interests                                              | X | None |

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ICMJE DISCLOSURE FORM

Date: ________________2022/10/14______________________________
Your Name: __________Hao He______________________________
Manuscript Title: Analysis of anatomical variation in the right upper lung intersegmental vein V2a based on a 3D reconstruction technique
Manuscript number (if known):_____________________________________________________

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| 3 | Royalties or licenses | \_X__None |
| 4 | Consulting fees | \_X__None |
|   | Question                                                                 | Answer |
|---|--------------------------------------------------------------------------|--------|
| 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 |
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ICMJE DISCLOSURE FORM

Date: ______________ 2022/10/14

Your Name: __________ Hui Lin

Manuscript Title: Analysis of anatomical variation in the right upper lung intersegmental vein V2a based on a 3D reconstruction technique

Manuscript number (if known): ____________________________________________________________________

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|---|-------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|--------------------------------------------------|
| 1 | All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) | _X_ None |                                                  |

No time limit for this item.

|   | Specifications/Comments (e.g., if payments were made to you or to your institution) | 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 | 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 |
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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:______________2022/10/14___________________________________________________________

Your Name:________ Xiaofeng Chen ______________________________________________________

Manuscript Title: Analysis of anatomical variation in the right upper lung intersegmental vein V2a based on a 3D reconstruction technique ______
Manuscript number (if known):__________________________________________________________

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Time frame: Since the initial planning of the work

|   | 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, 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: __________ 2022/10/14

Your Name: __________ Pei-Yuan Wang

Manuscript Title: Analysis of anatomical variation in the right upper lung intersegmental vein V2a based on a 3D reconstruction technique

Manuscript number (if known): __________________________________________________________________________

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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: Since the initial planning of the work

Time frame: past 36 months
|   | Conflict of Interest                                      |   |
|---|--------------------------------------------------------|---|
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|   | speakers bureaus, manuscript writing or educational   |   |
|   | events                                                 |   |
| 6 | Payment for expert testimony                           | _X_None |
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| 8 | Patents planned, issued or pending                     | _X_None |
| 9 | Participation on a Data Safety Monitoring Board or     | _X_None |
|   | Advisory Board                                         |   |
| 10 | Leadership or fiduciary role in other board, society,  | _X_None |
|   | committee or advocacy group, paid or unpaid            |   |
| 11 | Stock or stock options                                 | _X_None |
| 12 | Receipt of equipment, materials, drugs, medical       | _X_None |
|   | writing, gifts or other services                       |   |
| 13 | Other financial or non-financial interests             | _X_None |

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Date:__________________ 2022/10/14

Your Name: ____________________ ShuoYan Liu

Manuscript Title: Analysis of anatomical variation in the right upper lung intersegmental vein V2a based on a 3D reconstruction technique

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                                                                        |
|   |                                                                                             |                                                                                  |
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| 3 | Royalties or licenses                                                                         | _X__None                                                                        |
|   |                                                                                             |                                                                                  |
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|---|----------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|
| 4 | Consulting fees                                                                             | _X__None                                                                        |
|   |                                                                                             |                                                                                  |
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|   |                                                                                             |                                                                                  |
|   |                                                                                             |                                                                                  |
|   | Conflict of Interest                                                                 | _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     |
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Manuscript Title: Analysis of anatomical variation in the right upper lung intersegmental vein V2a based on a 3D reconstruction technique________
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| 3 | Royalties or licenses                                                                         | _X_None |
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| 8 | Patents planned, issued or pending                                                  | None |
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