

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

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Section 1. Identifying Inform	mation		
1. Given Name (First Name) Haibing	2. Surname (Last Name) Mei		3. Date 17-May-2020
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Na Gang Yao	me
5. Manuscript Title The diagnostic value of MRI for archite	ctural distortion categoriz	red as BI-RADS category 3–4	by mammography
6. Manuscript Identifying Number (if you k	now it)		
Section 2. The Work Under O	Consideration for Publ	ication	
Did you or your institution at any time rec any aspect of the submitted work (includin statistical analysis, etc.)? Are there any relevant conflicts of inte	g but not limited to grants, d		
Section 3. Relevant financia	l activities outside the	submitted work.	
Place a check in the appropriate boxes of compensation) with entities as desc clicking the "Add +" box. You should re Are there any relevant conflicts of inte	ribed in the instructions. Leport relationships that we	Jse one line for each entity; a	add as many lines as you need by
Section 4. Intellectual Prope	erty Patents & Copyri	ights	

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Ves



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Dr. Mei has nothing to disclose.

Evaluation and Feedback



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1. Given Name (First Name) Jian	2. Surname (Last Name) Xu	3. Date 17-May-2020
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Name Gang Yao
5. Manuscript Title The diagnostic value of MRI for archite	ctural distortion categoriz	red as BI-RADS category 3–4 by mammography
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Dr. Xu has nothing to disclose.

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