Date:2021-5-16
Your Name: Panpan Zhang
Manuscript Title:_Improved Inception V3 method and its effect on radiologists' performance of tumor classification
with automated breast ultrasound system_
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 <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)
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.	Time frame: Since the initialNone	pranning or the work
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	

Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert testimony Support for attending meetings and/or travel None None None None None	
lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert testimony Support for attending meetings and/or travel None None None None	
speakers bureaus, manuscript writing or educational events Payment for expert testimony Support for attending meetings and/or travel None None None	
manuscript writing or educational events 6 Payment for expert testimony 7 Support for attending meetings and/or travel	
educational events Payment for expert testimony Support for attending meetings and/or travel Payment for expertNone	
6 Payment for expert testimony 7 Support for attending meetings and/or travel	
7 Support for attending meetings and/or travel — None — No	
7 Support for attending meetings and/or travelNone	
meetings and/or travel	
meetings and/or travel	
8 Patents planned, issued orNone	
pending	
9 Participation on a DataNone	
Safety Monitoring Board or	
Advisory Board	
10 Leadership or fiduciary roleNone	
in other board, society,	
committee or advocacy	
group, paid or unpaid	
11 Stock or stock optionsNone	
12 Receipt of equipment,None	
materials, drugs, medical	
writing, gifts or other services	
13 Other financial or non- None	
financial interests	
Illiancial interests	
Please summarize the above conflict of interest in the following box:	

No conflicts of interest to declare.	

Date:	2021-5-16
Your Name:	Zhaosheng Ma
Manuscript ³	itle:_Improved Inception V3 method and its effect on radiologists' performance of tumor classification
with automa	ted breast ultrasound system_
Manuscript I	umber (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 <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)
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.	None None	planning of the work
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	

Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert testimony Support for attending meetings and/or travel None None None None None	
lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert testimony Support for attending meetings and/or travel None None None None	
speakers bureaus, manuscript writing or educational events Payment for expert testimony Support for attending meetings and/or travel None None None	
manuscript writing or educational events 6 Payment for expert testimony 7 Support for attending meetings and/or travel	
educational events Payment for expert testimony Support for attending meetings and/or travel Payment for expertNone	
6 Payment for expert testimony 7 Support for attending meetings and/or travel	
7 Support for attending meetings and/or travel — None — No	
7 Support for attending meetings and/or travelNone	
meetings and/or travel	
meetings and/or travel	
8 Patents planned, issued orNone	
pending	
9 Participation on a DataNone	
Safety Monitoring Board or	
Advisory Board	
10 Leadership or fiduciary roleNone	
in other board, society,	
committee or advocacy	
group, paid or unpaid	
11 Stock or stock optionsNone	
12 Receipt of equipment,None	
materials, drugs, medical	
writing, gifts or other services	
13 Other financial or non- None	
financial interests	
Illiancial interests	
Please summarize the above conflict of interest in the following box:	

No conflicts of interest to declare.	

Date:	2021-5-16
Your Name: Yingtao Zhang	
Manuscript Title:_Improved	Inception V3 method and its effect on radiologists' performance of tumor classification
with automated breast ultra	sound system_
Manuscript number (if know	/n):

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.	None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	

Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert testimony Support for attending meetings and/or travel None None None None None	
lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert testimony Support for attending meetings and/or travel None None None None	
speakers bureaus, manuscript writing or educational events Payment for expert testimony Support for attending meetings and/or travel None None None	
manuscript writing or educational events 6 Payment for expert testimony 7 Support for attending meetings and/or travel	
educational events Payment for expert testimony Support for attending meetings and/or travel Payment for expertNone	
6 Payment for expert testimony 7 Support for attending meetings and/or travel	
7 Support for attending meetings and/or travel — None — No	
7 Support for attending meetings and/or travelNone	
meetings and/or travel	
meetings and/or travel	
8 Patents planned, issued orNone	
pending	
9 Participation on a DataNone	
Safety Monitoring Board or	
Advisory Board	
10 Leadership or fiduciary roleNone	
in other board, society,	
committee or advocacy	
group, paid or unpaid	
11 Stock or stock optionsNone	
12 Receipt of equipment,None	
materials, drugs, medical	
writing, gifts or other services	
13 Other financial or non- None	
financial interests	
Illiancial interests	
Please summarize the above conflict of interest in the following box:	

No conflicts of interest to declare.	

Date:2021	-5-16		
Your Name: <u>Xiaodan Chen</u>			
Manuscript Title:_Improved Inception V3 method and its effect on radiologists' performance of tumor classification			
with automated breast ultras	ound system_		
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 <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)
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.	Time frame: Since the initialNone	pranning or the work
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	

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

No conflicts of interest to declare.	

Date:	_2021-5-16
Your Name:_Gang Wan	g
Manuscript Title:_Impro	oved Inception V3 method and its effect on radiologists' performance of tumor classification
with automated breast	ultrasound system_
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 <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)
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.	None None	planning of the work
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	

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

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

No conflict of interest to declare		

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