ICMJE DISCLOSURE FORM

Date: 30th August 2023 **Your Name:** Wah Loong Chan

Manuscript Title: Fibroscan-AST (FAST) score and other non-invasive tests for the diagnosis of fibrotic non-alcoholic

steatohepatitis

Manuscript number (if known): HBSN-23-346

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</u> <u>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.

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)
	AH	Time frame: Since the initial	planning of the work
1	All support for the present	None	
	manuscript (e.g., funding,		
	provision of study materials, medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
	any entity (if not indicated		
	in item #1 above).		
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 Safety Monitoring Board or	None	
40	Advisory Board		
10	Leadership or fiduciary role in other board, society,	None	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
	·		
12	Receipt of equipment,	None	
	materials, drugs, medical writing, gifts or other services		
13	Other financial or non-	None	
	financial interests		

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

WLC has no conflict of interest to disclose.		

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.

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Date: 30th August 2023

Your Name: C Vikneshwaran Chandra Kumar

Manuscript Title: Fibroscan-AST (FAST) score and other non-invasive tests for the diagnosis of fibrotic non-alcoholic

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1	All according to the consequent		planning of the work
1	All support for the present	None	
	manuscript (e.g., funding,		
	provision of study materials, medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None None	30 months
_	any entity (if not indicated	- None	
	in item #1 above).		
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 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	

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

CVCK has no conflict of interest to disclose.	

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

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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.	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	Roche Abbvie Boehringer Ingelheim Novo Nordisk	Payment to self for service rendered
5		Echosens	Payment to self for service rendered

	Payment or honoraria for	Novo Nordisk	Payment to self for service rendered
	lectures, presentations,	Viatris	Payment to self for service rendered
	speakers bureaus, manuscript writing or educational events	Hisky Medical	Payment to self for service rendered
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	Novo Nordisk	Support for attending the EASL 2023 meeting
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or	None	
	Advisory Board		
10	Leadership or fiduciary role in other board, society,	None	
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical writing, gifts or other services		
13	Other financial or non-	None	
	financial interests		

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

WKC received consulting fees from Roche, Abbvie, Boehringer Ingelheim and Novo Nordisk, payment for lectures from Echosens, Viatris, Hisky Medical and Novo Nordisk, and travel grant from Novo Nordisk.

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

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