

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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#### 1. Identifying information.

#### 2. The work under consideration for publication.

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This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Jian      2. Surname (Last Name) Lv      3. Date 18-March-2020

4. Are you the corresponding author?     Yes     No      Corresponding Author's Name  
Siming Zeng , Fan Xu, Haotian Lin

5. Manuscript Title  
Deep learning-based automated diagnosis of fungal keratitis with in vivo confocal microscopy images

6. Manuscript Identifying Number (if you know it)  
\_\_\_\_\_

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Are there any relevant conflicts of interest?     Yes     No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
The National Key Research and Development Program (2018YFC0116500)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Guangxi Promotion of Appropriate Health Technologies Project (No. S2019084)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Are there any relevant conflicts of interest?     Yes     No

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?     Yes     No

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Dr. Lv reports grants from The National Key Research and Development Program (2018YFC0116500), grants from Guangxi Promotion of Appropriate Health Technologies Project (No. S2019084), during the conduct of the study; .

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Kai      2. Surname (Last Name) Zhang      3. Date 19-March-2020

4. Are you the corresponding author?     Yes     No      Corresponding Author's Name  
Siming Zeng , Fan Xu, Haotian Lin

5. Manuscript Title  
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1. Given Name (First Name) Qi	2. Surname (Last Name) Chen	3. Date 19-March-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Siming Zeng , Fan Xu, Haotian Lin
5. Manuscript Title Deep learning-based automated diagnosis of fungal keratitis with in vivo confocal microscopy images		
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Wei

2. Surname (Last Name)  
Huang

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Are there any relevant conflicts of interest?  Yes  No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name) \_\_\_\_\_  
Ling

2. Surname (Last Name) \_\_\_\_\_  
Cui

3. Date \_\_\_\_\_  
19-March-2020

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Corresponding Author's Name  
Siming Zeng , Fan Xu, Haotian Lin

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Jianyin

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Li

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1. Given Name (First Name) Lifei	2. Surname (Last Name) Chen	3. Date 19-March-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Siming Zeng , Fan Xu, Haotian Lin
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**Royalties:** Funds are coming in to you or your institution due to your patent

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Chaolan	2. Surname (Last Name) Shen	3. Date 19-March-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Siming Zeng , Fan Xu, Haotian Lin
5. Manuscript Title Deep learning-based automated diagnosis of fungal keratitis with in vivo confocal microscopy images		
6. Manuscript Identifying Number (if you know it)  		

### Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest?  Yes  No

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Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
The National Key Research and Development Program (2018YFC0116500)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Guangxi Promotion of Appropriate Health Technologies Project (No. S2019084)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest?  Yes  No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No



## ICMJE Form for Disclosure of Potential Conflicts of Interest

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Zhao	2. Surname (Last Name) Yang	3. Date 19-March-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Siming Zeng , Fan Xu, Haotian Lin
5. Manuscript Title Deep learning-based automated diagnosis of fungal keratitis with in vivo confocal microscopy images		
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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Yixuan      2. Surname (Last Name) Bei      3. Date 19-March-2020

4. Are you the corresponding author?     Yes     No      Corresponding Author's Name  
Siming Zeng , Fan Xu, Haotian Lin

5. Manuscript Title  
Deep learning-based automated diagnosis of fungal keratitis with in vivo confocal microscopy images

6. Manuscript Identifying Number (if you know it)  
\_\_\_\_\_

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Are there any relevant conflicts of interest?     Yes     No

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Guangxi Promotion of Appropriate Health Technologies Project (No. S2019084)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Are there any relevant conflicts of interest?     Yes     No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?     Yes     No

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Lanjian      2. Surname (Last Name) Li      3. Date 19-March-2020

4. Are you the corresponding author?     Yes     No      Corresponding Author's Name  
Siming Zeng , Fan Xu, Haotian Lin

5. Manuscript Title  
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1. Given Name (First Name) Xiaohang      2. Surname (Last Name) Wu      3. Date 19-March-2020

4. Are you the corresponding author?     Yes     No      Corresponding Author's Name  
Siming Zeng , Fan Xu, Haotian Lin

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#### 4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

#### 5. Relationships not covered above.

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**Non-Financial Support:** Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

**Other:** Anything not covered under the previous three boxes

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**Royalties:** Funds are coming in to you or your institution due to your patent



## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Siming      2. Surname (Last Name) zeng      3. Date 18-March-2020

4. Are you the corresponding author?     Yes     No

5. Manuscript Title  
Deep learning-based automated diagnosis of fungal keratitis with in vivo confocal microscopy images

6. Manuscript Identifying Number (if you know it)  
\_\_\_\_\_

### Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest?     Yes     No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
The National Key Research and Development Program (2018YFC0116500)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Guangxi Promotion of Appropriate Health Technologies Project (No. S2019084)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were **present during the 36 months prior to publication**.

Are there any relevant conflicts of interest?     Yes     No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?     Yes     No

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. zeng reports grants from The National Key Research and Development Program (2018YFC0116500), grants from Guangxi Promotion of Appropriate Health Technologies Project (No. S2019084), during the conduct of the study; .

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### Instructions

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Fan

2. Surname (Last Name)  
Xu

3. Date  
18-March-2020

4. Are you the corresponding author?  Yes  No

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

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