

ICMJE DISCLOSURE FORM

Date: April 19, 2021

Your Name: Weimin Tan

Manuscript Title: The use of explainable artificial intelligence to explore types of fenestral otosclerosis misdiagnosed when using temporal bone high-resolution computed tomography

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 **current manuscript only**.

The author's relationships/activities/interests should be **defined broadly**. 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)
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.	<u>None</u>	
Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<u>None</u>	
3	Royalties or licenses	<u>None</u>	
4	Consulting fees	<u>None</u>	

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

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

Weimin Tan has no conflicts of interest to declare.

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: April 19, 2021

Your Name: Pengfei Guan

Manuscript Title: The use of explainable artificial intelligence to explore types of fenestral otosclerosis misdiagnosed when using temporal bone high-resolution computed tomography

Manuscript number (if known): _____

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13	Other financial or non-financial interests	<u> </u> None	

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

Pengfei Guan has no conflicts of interest to declare.

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: April 19, 2021

Your Name: Linjie Wu

Manuscript Title: The use of explainable artificial intelligence to explore types of fenestral otosclerosis misdiagnosed when using temporal bone high-resolution computed tomography

Manuscript number (if known): _____

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13	Other financial or non-financial interests	<u> </u> None	

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

Linjie Wu has no conflicts of interest to declare.

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: April 19, 2021

Your Name: Hedan Chen

Manuscript Title: The use of explainable artificial intelligence to explore types of fenestral otosclerosis misdiagnosed when using temporal bone high-resolution computed tomography

Manuscript number (if known): _____

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13	Other financial or non-financial interests	<u> </u> None	

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

Hedan Chen has no conflicts of interest to declare.

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: April 19, 2021

Your Name: Jichun Li

Manuscript Title: The use of explainable artificial intelligence to explore types of fenestral otosclerosis misdiagnosed when using temporal bone high-resolution computed tomography

Manuscript number (if known): _____

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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<u> </u> None	
13	Other financial or non-financial interests	<u> </u> None	

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

Jichun Li has no conflicts of interest to declare.

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: April 19, 2021

Your Name: Yu Ling

Manuscript Title: The use of explainable artificial intelligence to explore types of fenestral otosclerosis misdiagnosed when using temporal bone high-resolution computed tomography

Manuscript number (if known): _____

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13	Other financial or non-financial interests	<u> </u> None	

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

Yu Ling has no conflicts of interest to declare.

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: April 19, 2021

Your Name: Ting Fan

Manuscript Title: The use of explainable artificial intelligence to explore types of fenestral otosclerosis misdiagnosed when using temporal bone high-resolution computed tomography

Manuscript number (if known): _____

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Time frame: past 36 months			
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3	Royalties or licenses	None	
4	Consulting fees	None	

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

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

Ting Fan has no conflicts of interest to declare.

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: April 19, 2021
 Your Name: Yunfeng Wang
 Manuscript Title: The use of explainable artificial intelligence to explore types of fenestral otosclerosis misdiagnosed when using temporal bone high-resolution computed tomography
 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.) No time limit for this item.	the National Natural Science Foundation of China	No. 61772137, 61902076, 81670281, 81570919
Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<u>None</u>	
3	Royalties or licenses	<u>None</u>	

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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<u> </u> None	
13	Other financial or non-financial interests	<u> </u> None	

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

Yunfeng Wang has no conflicts of interest to declare.

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: April 19, 2021

Your Name: Jian Li

Manuscript Title: The use of explainable artificial intelligence to explore types of fenestral otosclerosis misdiagnosed when using temporal bone high-resolution computed tomography

Manuscript number (if known): _____

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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<u> </u> None	
13	Other financial or non-financial interests	<u> </u> None	

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

Jian Li has no conflicts of interest to declare.

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

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ICMJE DISCLOSURE FORM

Date: April 19, 2021

Your Name: Bo Yan

Manuscript Title: The use of explainable artificial intelligence to explore types of fenestral otosclerosis misdiagnosed when using temporal bone high-resolution computed tomography

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		the Shanghai Municipal Commission of Science and Technology Research Project	18140900304, 19140900902
		the clinical research and transformation incubation project	SZA2020004
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	

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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<u> </u> None	
13	Other financial or non-financial interests	<u> </u> None	

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

Dr. Yan reports funding from the big data and artificial intelligence project (2020DSJ07), the Shanghai Municipal Commission of Science and Technology Research Project (18140900304, 19140900902), and the clinical research and transformation incubation project (SZA2020004).

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