Date:2021/10/8
Your Name: Yang Zhang
Manuscript Title: Flagging performance of two automated hematology analyzers in blast cell screening

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) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution) 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.	The Joint Funds for the Innovation of Science and Technology, Fujian Province (No. 2017Y9051) Fujian Provincial Health Technology Project, promote appropriate technology projects for the grass-roots (No. 2019014)	
2	Grants or contracts from any entity (if not indicated in item #1 above). Royalties or licenses	None None	36 months

4	Consulting fees	None	
4	Consulting fees	None	
5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events	N	
6	Payment for expert testimony	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	None	
	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid	None	
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		

The Joint Funds for the Innovation of Science and Technology, Fujian Province (No. 2017Y9051). Fujian Provincial Health Technology Project, promote appropriate technology projects for the grass-roots (No. 2019014).

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

Date:2021/1	0/8
Your Name: P	ingli Yu
Manuscript Title:	Flagging performance of two automated hematology analyzers in blast cell screening

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> manuscript only.

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) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution) 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.	The Joint Funds for the Innovation of Science and Technology, Fujian Province (No. 2017Y9051) Fujian Provincial Health Technology Project, promote appropriate technology projects for the grass-roots (No. 2019014)	
2	Grants or contracts from any entity (if not indicated in item #1 above). Royalties or licenses	None None	36 months

4	Consulting fees	None	
4	Consulting fees	None	
5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events	N	
6	Payment for expert testimony	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	None	
	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid	None	
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		

The Joint Funds for the Innovation of Science and Technology, Fujian Province (No. 2017Y9051). Fujian Provincial Health Technology Project, promote appropriate technology projects for the grass-roots (No. 2019014).

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

Date:2021/1	0/8
Your Name: Z	hixin Chen
Manuscript Title:	Flagging performance of two automated hematology analyzers in blast cell screening

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) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution) 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.	The Joint Funds for the Innovation of Science and Technology, Fujian Province (No. 2017Y9051) Fujian Provincial Health Technology Project, promote appropriate technology projects for the grass-roots (No. 2019014)	
2	Grants or contracts from any entity (if not indicated in item #1 above). Royalties or licenses	None None	36 months

4	Consulting fees	None	
4	Consulting fees	None	
5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events	N	
6	Payment for expert testimony	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	None	
	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid	None	
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		

The Joint Funds for the Innovation of Science and Technology, Fujian Province (No. 2017Y9051). Fujian Provincial Health Technology Project, promote appropriate technology projects for the grass-roots (No. 2019014).

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

Date:2021/10/8
Your Name: Jingling Zhang
Manuscript Title: Flagging performance of two automated hematology analyzers in blast cell screening

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) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution) 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.	The Joint Funds for the Innovation of Science and Technology, Fujian Province (No. 2017Y9051) Fujian Provincial Health Technology Project, promote appropriate technology projects for the grass-roots (No. 2019014)	
2	Grants or contracts from any entity (if not indicated in item #1 above). Royalties or licenses	None None	36 months

4	Consulting fees	None	
4	Consulting fees	None	
5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events	N	
6	Payment for expert testimony	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	None	
	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid	None	
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		

The Joint Funds for the Innovation of Science and Technology, Fujian Province (No. 2017Y9051). Fujian Provincial Health Technology Project, promote appropriate technology projects for the grass-roots (No. 2019014).

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

Date:2021/1	0/8
Your Name: C	liu Lin
Manuscript Title:	Flagging performance of two automated hematology analyzers in blast cell screening

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.

		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.	The Joint Funds for the Innovation of Science and Technology, Fujian Province (No. 2017Y9051) Fujian Provincial Health Technology Project, promote appropriate technology projects for the grass-roots (No. 2019014)	
		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		
6	educational events Payment for expert	None	
0	testimony	None	
	testimony		
7	Support for attending	None	
,	meetings and/or travel	None	
	meetings and, or traver		
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 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	_	

The Joint Funds for the Innovation of Science and Technology, Fujian Province (No. 2017Y9051). Fujian Provincial Health Technology Project, promote appropriate technology projects for the grass-roots (No. 2019014).

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

Date:2021/1	0/8
Your Name: M	leihua Wang
Manuscript Title:	Flagging performance of two automated hematology analyzers in blast cell screening

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.

		Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution)
		1	planning of the work
1	All support for the present	The Joint Funds for the	/
	manuscript (e.g., funding,	Innovation of Science and	
	provision of study materials,	Technology, Fujian	
	medical writing, article	Province (No. 2017Y9051)	
	processing charges, etc.)	Fujian Provincial Health	/
	No time limit for this item.	Technology Project,	
		promote appropriate	
		technology projects for the	
		grass-roots (No. 2019014)	
		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	
4	Consulting fees	None	
5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events	N	
6	Payment for expert testimony	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	None	
	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid	None	
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		

The Joint Funds for the Innovation of Science and Technology, Fujian Province (No. 2017Y9051). Fujian Provincial Health Technology Project, promote appropriate technology projects for the grass-roots (No. 2019014).

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

Date:2021/10/8
Your Name: Yingping Cao
Manuscript Title: Flagging performance of two automated hematology analyzers in blast cell screening

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.

		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.	The Joint Funds for the Innovation of Science and Technology, Fujian Province (No. 2017Y9051) Fujian Provincial Health Technology Project, promote appropriate technology projects for the grass-roots (No. 2019014)	
		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	
0	testimony	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		
10	Advisory Board	A.I	
10	Leadership or fiduciary role	None	
	in other board, society, committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
	Stock of Stock options		
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		

The Joint Funds for the Innovation of Science and Technology, Fujian Province (No. 2017Y9051). Fujian Provincial Health Technology Project, promote appropriate technology projects for the grass-roots (No. 2019014).

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