Date: Jul. 21<sup>st</sup>, 2022 Your Name: Feifei Liu

Manuscript Title: Efficacy of Shear Wave Dispersion Imaging for viscoelastic assessment of liver in Acute Graft-Versus-

**Host Disease Rats** 

Manuscript number (if known): QIMS-22-374

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.	XNone	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	X_None	
4	Consulting fees	XNone	

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

Date: Jul. 22<sup>nd</sup>, 2022 Your Name: Jiaan Zhu

Manuscript Title: Efficacy of Shear Wave Dispersion Imaging for viscoelastic assessment of liver in Acute Graft-Versus-

**Host Disease Rats** 

Manuscript number (if known): QIMS-22-374

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.	XNone	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

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

Date: Jul. 21<sup>st</sup>, 2022 Your Name: Wenxue Li

Manuscript Title: Efficacy of Shear Wave Dispersion Imaging for viscoelastic assessment of liver in Acute Graft-Versus-

**Host Disease Rats** 

Manuscript number (if known): QIMS-22-374

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 initia	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.	XNone	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	X_None	
4	Consulting fees	XNone	

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

Date: Jul. 22<sup>nd</sup>, 2022 Your Name: Yiqun Liu

Manuscript Title: Efficacy of Shear Wave Dispersion Imaging for viscoelastic assessment of liver in Acute Graft-Versus-

**Host Disease Rats** 

Manuscript number (if known): QIMS-22-374

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.	XNone	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

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

Date: Jul. 19<sup>th</sup>, 2022 Your Name: Yu Xiong

Manuscript Title: Efficacy of Shear Wave Dispersion Imaging for viscoelastic assessment of liver in Acute Graft-Versus-

**Host Disease Rats** 

Manuscript number (if known): QIMS-22-374

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.	XNone	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

_				
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or	XNone		
	educational events			
6	Payment for expert	XNone		
	testimony			
7	Support for attending meetings and/or travel	XNone		
8	Patents planned, issued or	XNone		
	pending			
9	Participation on a Data Safety Monitoring Board or	XNone		
10	Advisory Board	V N		
10	Leadership or fiduciary role in other board, society, committee or advocacy	XNone		
	group, paid or unpaid			
11	Stock or stock options	XNone		
	·			
12	Receipt of equipment,	X_None		
	materials, drugs, medical			
	writing, gifts or other services			
12		V None		
13	Other financial or non- financial interests	X_None		
	manda micrests			
Plea	ase summarize the above co	nflict of interest in the f	ollowing box:	
l N	None.			

Date: Jul. 19<sup>th</sup>, 2022 Your Name: Yuwei Xin

Manuscript Title: Efficacy of Shear Wave Dispersion Imaging for viscoelastic assessment of liver in Acute Graft-Versus-

**Host Disease Rats** 

Manuscript number (if known): QIMS-22-374

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 initia	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.	XNone	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	X_None	
4	Consulting fees	XNone	

_				
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or	XNone		
	educational events			
6	Payment for expert	XNone		
	testimony			
7	Support for attending meetings and/or travel	XNone		
8	Patents planned, issued or	XNone		
	pending			
9	Participation on a Data Safety Monitoring Board or	XNone		
10	Advisory Board	V N		
10	Leadership or fiduciary role in other board, society, committee or advocacy	XNone		
	group, paid or unpaid			
11	Stock or stock options	XNone		
	·			
12	Receipt of equipment,	X_None		
	materials, drugs, medical			
	writing, gifts or other services			
12		V None		
13	Other financial or non- financial interests	X_None		
	manda micrests			
Plea	ase summarize the above co	nflict of interest in the f	ollowing box:	
l N	None.			