Date:	_Oct.10 th ,2022
Your Name:	Linggang Cheng
Manuscript Tit	le: The Association between the features of intraoperative ultrasound and MRI in the diagnosis of
<u>dysembryopla</u>	stic neuroepithelial tumor
Manuscript nu	mber (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.

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		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,	_ X _None	
	medical writing, article processing charges, etc.) No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	X_None	
3	Royalties or licenses	X None	
3	Noyanies of incenses		
4	Consulting fees	X None	
	5		

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

None.

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

Date:Oct	.10 th ,2022
Your Name:L	in Zhang
Manuscript Title:	The Association between the features of intraoperative ultrasound and MRI in the diagnosis of
dysembryoplastic ı	neuroepithelial tumor
Manuscript numbe	er (if known):

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	speakers bureaus,		
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	Advisory Board		
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11			
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	_ X _None	
	financial interests		

None.

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

Date:	_Oct.10 th ,2022
Your Name:	Lu Yin
Manuscript Tit	tle: The Association between the features of intraoperative ultrasound and MRI in the diagnosis of
dysembryopla:	stic neuroepithelial tumor
Manuscript nu	ımber (if known):

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6	Payment for expert testimony	XNone	
	testimony		
7	Support for attending	_ X _None	
/	meetings and/or travel		
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	pending		
9	Participation on a Data	_ X _None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	_ X _None	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	X None	
12	Receipt of equipment,	_ X _None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	_ X _None	
	financial interests		

None.

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

Date:	Oct.10 th ,2022	
Your Name:	Wei Zhang	
Manuscript Tit	le: <u>The Association b</u>	etween the features of intraoperative ultrasound and MRI in the diagnosis of
dysembryoplas	tic neuroepithelial tun	nor
Manuscript nu	mber (if known):	

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3	Royalties or licenses	XNone	
4	Consulting fees	_ XNone	

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	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6		X None	
6	Payment for expert testimony	XNone	
	testimony		
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/	meetings and/or travel		
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	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	_ X _None	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	X None	
12	Receipt of equipment,	_ X _None	
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	financial interests		

None.

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Date:	Oct.10 th ,2022
Your Name:	Wen He
Manuscript Tit	le: The Association between the features of intraoperative ultrasound and MRI in the diagnosis of
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4	Consulting fees	_ XNone				

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

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