Date:	_Aug.1 st ,2022
Your Name:	Zeru Zhang
Manuscript Titl	le: The Automatic Evaluation of Steno-occlusive Changes in TOF-MRA of Moyamoya Patients Using a
3D Coordinate	Attention Residual Network
Manuscript nur	mber (if known):QIMS-22-799

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		Time frame: past	36 months
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3	Royalties or licenses	_XNone	
4	Consulting fees	_X_None	

5	Payment or honoraria for lectures, presentations,	_XNone	
	speakers bureaus, manuscript writing or educational events		
6	Payment for expert	_X_None	
	testimony		
7	Current for other ding	V Nore	
7	Support for attending meetings and/or travel	X_None	
8	Patents planned, issued or	_XNone	
	pending		
9	Participation on a Data	X_None	
9	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	_XNone	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	_XNone	
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:	Aug.1 st ,2022
Your Name:	Yituo Wang
Manuscript Tit	e: The Automatic Evaluation of Steno-occlusive Changes in TOF-MRA of Moyamoya Patients Using a
3D Coordinate	Attention Residual Network
Manuscript nu	mber (if known):QIMS-22-799

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		Time frame: past	36 months
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3	Royalties or licenses	_XNone	
4	Consulting fees	_X_None	

5	Payment or honoraria for	_XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	X None	
0	testimony		
	testimony		
7	Support for attending meetings and/or travel	X_None	
8	Patents planned, issued or	_XNone	
	pending		
9	Participation on a Data	_X_None	
	Safety Monitoring Board or		
10	Advisory Board		
10	Leadership or fiduciary role in other board, society,	_XNone	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	_XNone	
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:	Aug.1 st ,2022
Your Name:	Shuai Zhou
Manuscript Titl	e: The Automatic Evaluation of Steno-occlusive Changes in TOF-MRA of Moyamoya Patients Using a
3D Coordinate	Attention Residual Network
Manuscript nur	nber (if known):QIMS-22-799

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		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	_XNone	
4	Consulting fees	_X_None	

5	Payment or honoraria for lectures, presentations,	_XNone	
	speakers bureaus, manuscript writing or educational events		
6	Payment for expert	_X_None	
	testimony		
7		V. News	
7	Support for attending meetings and/or travel	X_None	
8	Patents planned, issued or	_XNone	
	pending		
9	Participation on a Data	X None	
9	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	_XNone	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	_XNone	
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:	ug.1 st ,2022	
Your Name:	Zhaotong Li	
Manuscript Title	: The Automatic Evaluation of Steno-occlusive Changes in TOF-MRA of Moyamoya Patients Usi	ing a
3D Coordinate	ttention Residual Network	
Manuscript nun	ber (if known): QIMS-22-799	

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_		Time frame: Since the initial	planning of the work
1	All support for the present	XNone	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	_X_None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	_XNone	
4	Consulting fees	_X_None	

5	Payment or honoraria for lectures, presentations, speakers bureaus,	_XNone	
	manuscript writing or educational events		
6	Payment for expert	_X_None	
	testimony		
7		V. News	
7	Support for attending meetings and/or travel	X_None	
8	Patents planned, issued or	_XNone	
	pending		
9	Participation on a Data	X None	
9	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	_XNone	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	_XNone	
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:Aug.1 st ,2022	_
Your Name:Ying Peng	_
Manuscript Title: The Automatic Evaluation of Steno-occlusive Changes in TC	DF-MRA of Moyamoya Patients Using a
3D Coordinate Attention Residual Network	
Manuscript number (if known):QIMS-22-799	

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	T	Time frame: Since the initial	planning of the work
1	All support for the present	_XNone	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	_X_None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	_XNone	
4	Consulting fees	_X_None	

5	Payment or honoraria for lectures, presentations, speakers bureaus,	XNone	
	manuscript writing or educational events		
6	Payment for expert	_X_None	
	testimony		
7	Support for attending meetings and/or travel	X_None	
8	Patents planned, issued or	_XNone	
	pending		
9	Participation on a Data	X None	
9	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	_XNone	
	in other board, society, committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	_XNone	
12	Dessint of any immed	V. Nana	
12	Receipt of equipment, materials, drugs, medical	X _None	
	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:	Aug.1 st ,2022
Your Name:	Song Gao
Manuscript Titl	e: The Automatic Evaluation of Steno-occlusive Changes in TOF-MRA of Moyamoya Patients Using a
3D Coordinate	Attention Residual Network
Manuscript nur	nber (if known):QIMS-22-799

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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,	National Natural Science Foundation of China	12075011
	provision of study materials, medical writing, article	Natural Science Foundation of Beijing	7202093
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	_X_None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	_XNone	
4	Consulting fees	_X_None	

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

This research was funded by the National Natural Science Foundation of China(Grant No.12075011) and the Natural Science Foundation of Beijing (Grant No.7202093)

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form.

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Date:	_Aug.1 st ,2022
Your Name:	Guangming Zhu
Manuscript Tit	tle: The Automatic Evaluation of Steno-occlusive Changes in TOF-MRA of Moyamoya Patients Using a
3D Coordinate	Attention Residual Network
Manuscript nu	umber (if known):QIMS-22-799

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		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	_XNone	
4	Consulting fees	_X_None	

5	Payment or honoraria for	_XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
6	educational events	V Nere e	
6	Payment for expert testimony	_X_None	
	testimony		
7	Support for attending	X None	
'	meetings and/or travel		
8	Patents planned, issued or	_XNone	
	pending		
9	Participation on a Data	_X_None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	_XNone	
	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		

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ICMJE DISCLOSURE FORM

Date:	_Aug.1 st ,2022
Your Name:	Fengliang Wu
Manuscript Tit	tle: The Automatic Evaluation of Steno-occlusive Changes in TOF-MRA of Moyamoya Patients Using a
3D Coordinate	e Attention Residual Network
Manuscript nu	umber (if known):QIMS-22-799

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		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	_XNone	
4	Consulting fees	_X_None	
5	Payment or honoraria for	_XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	_X_None	
	testimony		
_			
7	Support for attending meetings and/or travel	X_None	
	meetings und/or traver		
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	_XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	_XNone	
	-		
12	Receipt of equipment,	_X_None	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	X None	
-	financial interests		

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

Date:	_Aug.1 st ,2022	
Your Name:	Bing Wu	
Manuscript Titl	le: The Automatic Evaluation of Steno-occlusive Changes in TC	F-MRA of Moyamoya Patients Using a
3D Coordinate	Attention Residual Network	
Manuscript nur	mber (if known): QIMS-22-799	

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	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	_XNone					
4	Consulting fees	_X_None					

5	Payment or honoraria for	_XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
6	educational events	Y Nore	
6	6 Payment for expert testimony	_X_None	
7	Support for attending	X None	
/	meetings and/or travel		
8	Patents planned, issued or pending	_XNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	_X_None	
10	Leadership or fiduciary role in other board, society,	_XNone	
	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 services	_X _None	
13	Other financial or non- financial interests	X None	

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