Yo Ma		es of giant cell tumor and	d chondroblastoma around the knee			
	Manuscript number (if known): QIMS-22-616-R1					
rel pa to	ated to the content of your rties whose interests may be	manuscript. "Related" mea e affected by the content o necessarily indicate a bias.	ans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment If you are in doubt about whether to list a			
	e following questions apply anuscript only.	to the author's relationshi	ps/activities/interests as they relate to the <u>current</u>			
to me	the epidemiology of hypertoedication, even if that medic	ension, you should declare cation is not mentioned in to poort for the work reporte	defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive the manuscript. d in this manuscript without time limit. For all other item			
CIIC	e time mame for disclosure i	s the past 50 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)			
		whom you have this relationship or indicate none (add rows as	(e.g., if payments were made to you or to your institution)			
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.	whom you have this relationship or indicate none (add rows as needed)	(e.g., if payments were made to you or to your institution)			
1	manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)	whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initial	(e.g., if payments were made to you or to your institution)			
1	manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)	whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initial	(e.g., if payments were made to you or to your institution) planning of the work			
1	manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item. Grants or contracts from any entity (if not indicated in item #1 above).	whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initial XNone	(e.g., if payments were made to you or to your institution) planning of the work			
1	manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item. Grants or contracts from any entity (if not indicated	whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initial _X_None Time frame: past	(e.g., if payments were made to you or to your institution) planning of the work			

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone
6	Payment for expert testimony	XNone
7	Support for attending meetings and/or travel	XNone
8	Patents planned, issued or pending	XNone
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone
11	Stock or stock options	XNone
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None
13	Other financial or non- financial interests	XNone
Ple	ease summarize the above o	onflict of interest in the following box:

None.			

Da	te:Nov. 1 st , 2022		
Yo	ur Name: Yuan Wu		
Ma	anuscript Title: Image	es of giant cell tumor and	d chondroblastoma around the knee
Ma	anuscript number (if known)	:QIMS-22-616	5-R1
In rel pa to rel Th ma	the interest of transparency ated to the content of your rties whose interests may be transparency and does not ationship/activity/interest, e following questions apply muscript only. e author's relationships/act the epidemiology of hypertedication, even if that medicated the document of the second of the epidemiology of th	r, we ask you to disclose all manuscript. "Related" me e affected by the content on necessarily indicate a bias. it is preferable that you do to the author's relationship ivities/interests should be ension, you should declare eation is not mentioned in apport for the work reporter.	I relationships/activities/interests listed below that are cans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment of the manuscript. Disclosure represents a commitment of the manuscript about whether to list a poso. Ips/activities/interests as they relate to the current of defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive
		Name all entities with	Specifications/Comments
		whom you have this relationship or indicate	(e.g., if payments were made to you or to your institution)
		none (add rows as	institution,
		needed)	
		Time frame: Since the initia	il planning of the work
L	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 forms and	26 months
)	Grants or contracts from	Time frame: past	1 SO MONUNS
<u>-</u>	any entity (if not indicated	XNone	
	in item #1 above).		
3	Royalties or licenses	XNone	
	·		
1	Consulting fees	XNone	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone
6	Payment for expert testimony	XNone
7	Support for attending meetings and/or travel	XNone
8	Patents planned, issued or pending	XNone
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone
11	Stock or stock options	XNone
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None
13	Other financial or non- financial interests	XNone
Ple	ease summarize the above o	onflict of interest in the following box:

None.			

Date:Nov. 1 st , 2022
Your Name:Jin-Xu Wen
Manuscript Title: Images of giant cell tumor and chondroblastoma around the knee
Manuscript number (if known): QIMS-22-616-R1

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.

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.	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	V. None			
6	Payment for expert testimony	XNone			
	1000				
7	Support for attending meetings and/or travel	XNone			
8	Patents planned, issued or	XNone			
	pending				
9	Participation on a Data	XNone			
	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	XNone			
12	Receipt of equipment,	V None			
12	materials, drugs, medical	X_None			
	writing, gifts or other services				
13	Other financial or non-	XNone			
	financial interests				
Ple	Please summarize the above conflict of interest in the following box:				

None.			

Da	te:Nov. 1 st , 2022			
Yo	ur Name: Zhi-Wei Zhor	ng		
Ma	anuscript Title: Image	es of giant cell tumor an	d chondroblastoma around the knee	
	anuscript number (if known)	_		
In rel pa to rel Th ma	the interest of transparency ated to the content of your rties whose interests may be transparency and does not ationship/activity/interest, e following questions apply anuscript only.	r, we ask you to disclose al manuscript. "Related" me e affected by the content of necessarily indicate a bias it is preferable that you do to the author's relationshi ivities/interests should be ension, you should declare	I relationships/activities/interests listed below that are cans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment. If you are in doubt about whether to list a o so. ips/activities/interests as they relate to the current defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive	
	item #1 below, report all sup e time frame for disclosure is	•	ed in this manuscript without time limit. For all other item	IS,
		Name all entities with	Specifications/Comments	
		whom you have this relationship or indicate	(e.g., if payments were made to you or to your institution)	
		none (add rows as	,	
		needed)		
		Time frame: Since the initia	Il planning of the work	
L	All support for the present	X None		
=	manuscript (e.g., funding,			
	provision of study materials,			
	medical writing, article			
	processing charges, etc.)			
	No time limit for this item.			
		Time frame: past	t 36 months	
2	Grants or contracts from	XNone		
	any entity (if not indicated			
	in item #1 above).			
3	Royalties or licenses	XNone		
1	Consulting fees	X None		
		· —— ——	I I	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone
6	Payment for expert testimony	XNone
7	Support for attending meetings and/or travel	XNone
8	Patents planned, issued or pending	XNone
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone
11	Stock or stock options	XNone
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None
13	Other financial or non- financial interests	XNone
Ple	ease summarize the above o	onflict of interest in the following box:

None.			

Da	te:Nov. 1 st , 2022				
Yo	ur Name: Bao-Hai Yu _	_			
Ma	anuscript Title: Image	s of giant cell tumor and	d chondroblastoma around the knee		
Ma	Manuscript number (if known): QIMS-22-616-R1				
rel pa to	ated to the content of your rties whose interests may be	manuscript. "Related" mea e affected by the content on necessarily indicate a bias.	relationships/activities/interests listed below that are ans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment If you are in doubt about whether to list a so.		
	e following questions apply nuscript only.	to the author's relationshi	ps/activities/interests as they relate to the <u>current</u>		
to me	the epidemiology of hyperte edication, even if that medic	ension, you should declare ation is not mentioned in to pport for the work reporte	defined broadly. For example, if your manuscript pertai all relationships with manufacturers of antihypertensive the manuscript. d in this manuscript without time limit. For all other ite	е	
		Name all entities with whom you have this relationship or indicate none (add rows as	Specifications/Comments (e.g., if payments were made to you or to your institution)		
		needed)			
		Time frame: Since the initial	planning of the work		
	All I C				
L	All support for the present manuscript (e.g., funding,	XNone			
	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	XNone			
	any entity (if not indicated in item #1 above).				
			1		

Consulting fees

X__None

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone		
6	Payment for expert testimony	XNone		
7	Support for attending meetings and/or travel	XNone		
8	Patents planned, issued or pending	XNone		
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone		
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone		
11	Stock or stock options	XNone		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None		
13	Other financial or non- financial interests	XNone		
Ple	Please summarize the above conflict of interest in the following box:			

None.			

Da	te:Nov. 1 st , 2022		
Yo	ur Name: Chang Liu		
Ma	anuscript Title:Image	s of giant cell tumor an	d chondroblastoma around the knee
Ma	anuscript number (if known)	QIMS-22-616	5-R1
rel pa to rel Th ma	ated to the content of your rties whose interests may be transparency and does not ationship/activity/interest, e following questions apply anuscript only. e author's relationships/act the epidemiology of hypertedication, even if that medications	manuscript. "Related" me e affected by the content of necessarily indicate a bias, it is preferable that you do to the author's relationshi ivities/interests should be ension, you should declare ation is not mentioned in	ips/activities/interests as they relate to the <u>current</u> <u>defined broadly</u> . For example, if your manuscript pertains all relationships with manufacturers of antihypertensive
		Name all entities with whom you have this relationship or indicate	Specifications/Comments (e.g., if payments were made to you or to your institution)
		none (add rows as needed)	
		Time frame: Since the initia	l 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	t 36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	

Consulting fees

X__None

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone		
6	Payment for expert testimony	XNone		
7	Support for attending meetings and/or travel	XNone		
8	Patents planned, issued or pending	XNone		
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone		
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone		
11	Stock or stock options	XNone		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None		
13	Other financial or non- financial interests	XNone		
Ple	Please summarize the above conflict of interest in the following box:			

None.			

υa	te:Nov. 1 st , 2022					
Yo	ur Name: Lei Cao					
Ma	Manuscript Title: Images of giant cell tumor and chondroblastoma around the knee					
Ma	Manuscript number (if known): QIMS-22-616-R1					
relipanto relima The ma	ated to the content of your rties whose interests may be transparency and does not ationship/activity/interest, e following questions apply anuscript only. e author's relationships/act the epidemiology of hypertedication, even if that medications	manuscript. "Related" means affected by the content of the author's relationship in the content of the content	ps/activities/interests as they relate to the <u>current</u> <u>defined broadly</u> . For example, if your manuscript pertair all relationships with manufacturers of antihypertensive	е		
		Name all entities with whom you have this relationship or indicate	Specifications/Comments (e.g., if payments were made to you or to your institution)			
		none (add rows as				
		needed)	planning of the work			
		needed) 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.	needed)	planning of the work			
1	manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)	needed) Time frame: Since the initiaXNone				
1	manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item. Grants or contracts from any entity (if not indicated in item #1 above).	needed) Time frame: Since the initia				
1 2 2 3	manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item. Grants or contracts from any entity (if not indicated	needed) Time frame: Since the initiaXNone Time frame: past				

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone		
6	Payment for expert testimony	XNone		
7	Support for attending meetings and/or travel	XNone		
8	Patents planned, issued or pending	XNone		
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone		
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone		
11	Stock or stock options	XNone		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None		
13	Other financial or non- financial interests	XNone		
Ple	Please summarize the above conflict of interest in the following box:			

None.			

Da	ite:Nov. 1 st , 2022		
Yo	ur Name: Tao Sun		
M	anuscript Title: Image	es of giant cell tumor an	d chondroblastoma around the knee
M	anuscript number (if known)): QIMS-22-61	6-R1
rel pa to rel Th ma	ated to the content of your rties whose interests may be transparency and does not lationship/activity/interest, e following questions apply anuscript only. e author's relationships/act the epidemiology of hyperter	manuscript. "Related" mee affected by the content necessarily indicate a bias it is preferable that you do to the author's relationsh ivities/interests should be ension, you should declare	dips/activities/interests as they relate to the <u>current</u> e <u>defined broadly</u> . For example, if your manuscript pertains e all relationships with manufacturers of antihypertensive
In	edication, even if that medic item #1 below, report all su e time frame for disclosure i	pport for the work reporte	ed in this manuscript without time limit. For all other items,
		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	al 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	
1	Country and and	Time frame: pas	t 36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	

Consulting fees

X__None

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone		
6	Payment for expert testimony	XNone		
7	Support for attending meetings and/or travel	XNone		
8	Patents planned, issued or pending	XNone		
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone		
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone		
11	Stock or stock options	XNone		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None		
13	Other financial or non- financial interests	XNone		
Ple	Please summarize the above conflict of interest in the following box:			

None.			

Yo Ma	Your Name: Shu-Man Han Manuscript Title: Images of giant cell tumor and chondroblastoma around the knee Manuscript number (if known): QIMS-22-616-R1						
rel pa to	ated to the content of your rties whose interests may be	manuscript. "Related" mea e affected by the content o necessarily indicate a bias.	relationships/activities/interests listed below that are ans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment of the manuscript about whether to list a so.				
	e following questions apply anuscript only.	to the author's relationshi	ps/activities/interests as they relate to the <u>current</u>				
to me	the epidemiology of hypertoedication, even if that medic	ension, you should declare ation is not mentioned in toport for the work reporte	defined broadly. For example, if your manuscript pertain all relationships with manufacturers of antihypertensive the manuscript. d in this manuscript without time limit. For all other iter	9			
		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)				
1	All support for the present	Time frame: Since the initialXNone	planning of the work				
	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 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 educational events	XNone			
6	Payment for expert testimony	XNone			
7	Support for attending meetings and/or travel	XNone			
8	Patents planned, issued or pending	XNone			
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone			
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone			
11	Stock or stock options	XNone			
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None			
13	Other financial or non- financial interests	XNone			
Ple	Please summarize the above conflict of interest in the following box:				

None.			

Yo Ma	te:Nov. 1 st , 2022 ur Name:Bu-Lang Gao anuscript Title: Image anuscript number (if known)	es of giant cell tumor an	nd chondroblastoma around the knee 6-R1	
rel pa to	ated to the content of your rties whose interests may be	manuscript. "Related" me e affected by the content necessarily indicate a bias	Il relationships/activities/interests listed below that are eans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment is. If you are in doubt about whether to list a o so.	
	e following questions apply nuscript only.	to the author's relationsh	ips/activities/interests as they relate to the <u>current</u>	
to me	the epidemiology of hypertoedication, even if that medic	ension, you should declare ation is not mentioned in pport for the work reporte	e defined broadly. For example, if your manuscript pertaine all relationships with manufacturers of antihypertensive the manuscript. ed in this manuscript without time limit. For all other ite	e
		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	al planning of the work	
L	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		
	Crants or contracts from	Time frame: pas	t 36 months	
<u> </u>	Grants or contracts from any entity (if not indicated in item #1 above).	XNone		
3	Royalties or licenses	XNone		

Consulting fees

None

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone			
6	Payment for expert testimony	XNone			
7	Support for attending meetings and/or travel	XNone			
8	Patents planned, issued or pending	XNone			
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone			
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone			
11	Stock or stock options	XNone			
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None			
13	Other financial or non- financial interests	XNone			
Ple	Please summarize the above conflict of interest in the following box:				

None.			

	te:Nov. 1 st , 2022		
	ur Name: Wen-Juan W		1 .1
		•	d chondroblastoma around the knee
Ma	nuscript number (if known)	: Q1MS-22-616	D-K1
related to the mean of the to the to the mean of the to the	ated to the content of your rties whose interests may be transparency and does not entionship/activity/interest, ationship/activity/interest, ationship questions apply nuscript only. The author's relationships/act the epidemiology of hyperty dication, even if that medication,	manuscript. "Related" means affected by the content of the author's relationship in the content of the content	ps/activities/interests as they relate to the <u>current</u> <u>defined broadly</u> . For example, if your manuscript pertains all relationships with manufacturers of antihypertensive
		Name all entities with whom you have this relationship or indicate none (add rows as	Specifications/Comments (e.g., if payments were made to you or to your institution)
		needed)	
		Time frame: Since the initial	planning of the work
	All support for the present	X None	
-	manuscript (e.g., funding, provision of study materials,	NOTIE	
	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	
	,		
1	Consulting fees	XNone	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone			
6	Payment for expert testimony	XNone			
7	Support for attending meetings and/or travel	XNone			
8	Patents planned, issued or pending	XNone			
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone			
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone			
11	Stock or stock options	XNone			
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None			
13	Other financial or non- financial interests	XNone			
Ple	Please summarize the above conflict of interest in the following box:				

None.			