ICMJE DISCLOSURE FORM

| Date: | _ Nov 22, 2022 |
|--------------------|---|
| Your Name: | _ Guangjun Li |
| Manuscript Title: | _ Machine learning for predicting accuracy of lung and liver tumor motion tracking |
| using radiomic fe | atures |
| Manuscript numb | per (if known): |
| | |
| In the interest of | transparency, we ask you to disclose all relationships/activities/interests listed belo |

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

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The following questions apply to the author's relationships/activities/interests as they relate to the current

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.

In item #1 below, report all support for the work reported 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) |
|---|---|--|---|
| | Ţi | me 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. | X_None | |
| | | 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 |
|----|--|---------|
| | | |
| 4 | Consulting fees | XNone |
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| 5 | Payment or honoraria for | XNone |
| | lectures, presentations, | |
| | speakers bureaus, manuscript writing or | |
| | educational events | |
| 6 | Payment for expert | XNone |
| | testimony | |
| 7 | Cupport for attanding | V. None |
| / | Support for attending meetings and or travel | _XNone |
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| | | |
| 8 | Patents planned, issued | XNone |
| | or pending | |
| 9 | Participation on a Data | XNone |
| 9 | Safety Monitoring Board | XNOTIE |
| | or Advisory Board | |
| 10 | Leadership or fiduciary | XNone |
| | role in other board, | |
| | society, committee or | |
| | advocacy group, paid or unpaid | |
| 11 | Stock or stock options | XNone |
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| | | |
| 12 | Receipt of equipment, | XNone |
| | materials, drugs, medical writing, gifts or other | |
| | services | |
| 13 | Other financial or non- | XNone |
| | financial interests | |
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Please summarize the above conflict of interest in the following box:

| None | | | |
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| Please place an "X" next to the following statement to indicate your agreement: | | | | | |
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| _X I certify that I have answered every question and have not altered the wording of any of the questions on this form. | | | | | |
| ICN | JE DISCLOSURE FORM | | | | |
| Date:Nov 22, 2022 Your Name:Xiangyu Zhang Manuscript Title:_ Machine learning for predicting using radiomic features Manuscript number (if known): | g accuracy of lung and liver tumor motion tracking | | | | |
| that are related to the content of your manuscript. "Relate third parties whose interests may be affected by the commitment | e a bias. If you are in doubt about whether to list a | | | | |
| The following questions apply to the author's relacurrent manuscript only. | tionships/activities/interests as they relate to the | | | | |
| pertains to the epidemiology of hypertension, you should of antihypertensive medication, even if that medicat | ion is not mentioned in the manuscript. eported in this manuscript without time limit. For all | | | | |
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| | 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 | 30 1110111113 |
| 3 | Royalties or licenses | X_None | |
| 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 for 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 | XNone | |
| 13 | Other financial or non- financial interests | XNone | |

Please summarize the above conflict of interest in the following box:

| None | | | |
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| Ple | ase place an "X" next to the following statement to indicate your agreement: |
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| | I certify that I have answered every question and have not altered the wording of any of the estions on this form. |
| | ICMJE DISCLOSURE FORM |
| Y o Ma | te:Nov 22, 2022 |
| IVIa | nuscript number (if known): |
| that relations the relations to the rela | the interest of transparency, we ask you to disclose all relationships/activities/interests listed below t are ated to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit or detection to the content of the manuscript. Disclosure represents a mmitment transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a ationship/activity/interest, it is preferable that you do so. |
| <u>cu</u> | e following questions apply to the author's relationships/activities/interests as they relate to the rent nuscript only. |
| per to | e author's relationships/activities/interests should be <u>defined broadly</u> . For example, if your manuscript tains the epidemiology of hypertension, you should declare all relationships with manufacturers of tihypertensive medication, even if that medication is not mentioned in the manuscript. |
| oth | tem #1 below, report all support for the work reported in this manuscript without time limit. For all er items, time frame for disclosure is the past 36 months. |
| | 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) | |
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| | Ti | me frame: Since the initial | nlanning 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. | X_None Time frame: past | |
| 2 | Grants or contracts from any entity (if not indicated in item #1 above). | X_None | 00 monu13 |
| 3 | Royalties or licenses | X_None | |
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| 6 | Payment for expert testimony | XNone | |
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| 8 | Patents planned, issued or pending | XNone | |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board | XNone | |
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| 11 | Stock or stock options | XNone | |
| 12 | Receipt of equipment, materials, drugs, medical writing, gifts or other | XNone | |

| | services | | | |
|---|-------------------------|----------------------------|----------------------|--|
| 13 | Other financial or non- | XNone | | |
| | financial interests | | | |
| Please summarize the above conflict of interest in the following box: | | | | |
| PΙ | ease summarize the abo | ve conflict of interest ir | n the following box: | |

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_X__ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

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| Date: | Nov 22, 2022 |
|--------------------|--|
| Your Name: | Lian Duan |
| Manuscript Title:_ | Machine learning for predicting accuracy of lung and liver tumor motion tracking |
| using radiomic fea | atures |
| Manuscript numb | er (if known): |

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are

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| 1 | All support for the | me frame: Since the initiaX_None | planning of the work |
| | present 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). | X_None | |
| 3 | Royalties or licenses | X_None | |
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| 4 | Consulting fees | X None | |
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| 5 | Payment or honoraria for | XNone | |
| | lectures, presentations, speakers bureaus, manuscript writing or | | |
| | educational events | | |
| 6 | Payment for expert testimony | XNone | |
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| 7 | Support for attending meetings and for travel | _XNone | |
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| 8 | Patents planned, issued | XNone | |
| | or pending | | |
| 9 | Participation on a Data | XNone | |
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| 10 | Leadership or fiduciary role in other board, | XNone | |
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| | unpaid | | |
| 11 | Stock or stock options | X_None | |
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| 13 | Other financial or non- | X_None | |
| | financial interests | | |
| | ease summarize the abo None | ve conflict of interes | t in the following box: |
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| PΙ | ease place an "X" next to | the following state: | ment to indicate your agreement: |
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| | | 10 | CMJE DISCLOSURE FORM |
| Da | nte:Nov 22, 2 | 2022 | |
| | our Name:Guangyı | | |
| Ma | anuscript Title: Machine | e learning for predict | ting accuracy of lung and liver tumor motion tracking |
| us | ing radiomic features | | |
| Ma | anuscript number (if kno | wn): | |
| In tha | the interest of transpare at are | ncy, we ask you to c | disclose all relationships/activities/interests listed belonged in the state of the |
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| Ļ | | me frame: Since the initia | planning of the work |
| 1 | All support for the present manuscript (e.g., | X_None | |
| | funding, provision of | | |
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| | charges, etc.) | | |
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| 2 | Cronto or contracto from | Time frame: past | 36 months |
| 2 | Grants or contracts from any entity (if not indicated | X_None | |
| | in item #1 above). | | |
| 3 | Royalties or licenses | X_None | |
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| 4 | Consulting fees | XNone | |
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| | speakers bureaus, | | |
| | manuscript writing or | | |
| 6 | educational events Payment for expert | XNone | |
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| 7 | Support for attending | _XNone | |
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| 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 | |
| 1 | Stock or stock options | XNone | |
| 2 | Receipt of equipment, materials, drugs, medical writing, gifts or other services | XNone | |
| 3 | Other financial or non- financial interests | X_None | |
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| Y c Ma us | our Name:Qing Xia anuscript Title:_ Machine ing radiomic features | 022 oe learning for predic | ting accuracy of lung and liver tumor motion tracking |

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| | funding, provision of | | |
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| | charges, etc.) No time limit for this | | |
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| 2 | Grants or contracts from any entity (if not indicated | X_None | 30 HIOHUIS |
| | in item #1 above). | | |
| 3 | Royalties or licenses | X None | |
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| 4 | Consulting fees | XNone | |
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| 5 | Payment or honoraria for | XNone | |
| | lectures, presentations, speakers bureaus, | | |
| | manuscript writing or | | |
| | educational events | | |
| 6 | Payment for expert | XNone | |
| | testimony | | |

| 7 | Support for attending | _XNone | |
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| 8 | Patents planned, issued or pending | XNone | |
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| 9 | Participation on a Data Safety Monitoring Board or Advisory Board | XNone | |
| 10 | Leadership or fiduciary | XNone | |
| | role in other board, society, committee or | | _ |
| | advocacy group, paid or | | |
| 11 | unpaid Stock or stock options | XNone | |
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| 12 | Receipt of equipment, | XNone | |
| | materials, drugs, medical writing, gifts or other | | |
| | services | | |
| 13 | Other financial or non- financial interests | XNone | |
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| PΙθ | ease place an "X" next to | the following statem | ent to indicate your agreement: |
| | I certify that I have an estions on this form. | nswered every questio | on and have not altered the wording of any of the |
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| Da | Nov. 22. 1 | 2022 | |
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| Manuscript Title:_ Machine learning for predicting accuracy of lung and liver tumor motion tracking |
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| using radiomic features |
| Manuscript number (if known): |

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| | Ti | me 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. | X_None | |
| | | 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 | |
| 4 | Consulting fees | X_None | |

| 5 | Payment or honoraria for | XNone | |
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| | lectures, presentations, | | |
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| | manuscript writing or | | |
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| 6 | Payment for expert | XNone | |
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| 7 | Support for attending meetings and for travel | _XNone | |
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| 8 | Patents planned, issued | X_None | |
| | or pending | | |
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| 9 | Participation on a Data | XNone | |
| | Safety Monitoring Board | | |
| | or Advisory Board | | |
| 10 | Leadership or fiduciary | X_None | |
| | role in other board, | | |
| | society, committee or | | |
| | advocacy group, paid or | | |
| 11 | unpaid | V Name | |
| 11 | Stock or stock options | XNone | |
| | | | |
| 12 | Receipt of equipment, | X None | |
| | materials, drugs, medical | XNOTIE | |
| | writing, gifts or other | | |
| | services | | |
| 13 | Other financial or non- | XNone | |
| | financial interests | | |
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| Ple | ease summarize the abo | ve conflict of interest in | the following box: |

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

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| | | IC M. | JE DISCLOSURE FORM | |
| Da | te. Nov 22 2 | 2022 | | |
| Yn | ur Name Lan Lian | | | |
| Ma | nuscript Title: Machine | e learning for predicting | accuracy of lung and liver tumor motion tracki | na |
| | ng radiomic features | | | 9 |
| Ma | inuscript number (if kno | wn): | | |
| | the interest of transpare | ncy, we ask you to disc | lose all relationships/activities/interests listed b | oelow |
| rel thi | | our manuscript. "Relate | d" means any relation with for-profit or not-for- | profit |
| • | rties whose interests ma mmitment | ay be affected by the co | ntent of the manuscript. Disclosure represents | а |
| | transparency and does ationship/activity/interes | | a bias. If you are in doubt about whether to lis ou do so. | ta |
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| | e author's relationships, rtains | /activities/interests sho | uld be <u>defined broadly</u> . For example, if your mai | nuscript |
| to | the epidemiology of hyp | | eclare all relationships with manufacturers of on is not mentioned in the manuscript. | |
| oth | item #1 below, report all ner items, e time frame for disclosu | | eported in this manuscript without time limit. Fo | or all |
| | | 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) | |
| | Ti | me frame: Since the initial | planning of the work | |
| | All support for the | X_None | | |
| | present manuscript (e.g., funding, provision of | | | |
| | study materials, medical | | | |
| | writing, article processing | | | |
| | charges, etc.) | | | |
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| | | Time frame: past 36 months |
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| 2 | Grants or contracts from | X_None |
| | any entity (if not indicated | |
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| 3 | Royalties or licenses | X_None |
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| 4 | Consulting fees | XNone |
| | | |
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| 5 | Payment or honoraria for | XNone |
| | lectures, presentations, | |
| | speakers bureaus, manuscript writing or | |
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| 11 | Stock or stock options | X None |
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| _X I certify that I have answered every question and have not altered the wording of any of the | | | | | | |
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| _X I certify that I have answered every question and have not altered the wording of any of the questions on this form. | | | | | | |
| ICMJE DISCLOSURE FORM | | | | | | |
| Date:Nov 22, 2022 Your Name:Long Bai Manuscript Title:_ Machine learning for predicting accuracy of lung and liver tumor motion tracking using radiomic features | | | | | | |
| using radiomic features Manuscript number (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 | | | | | | |
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| | | Time frame: pas | 36 months |
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| 7 | Support for attending meetings and for travel | _XNone | |
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| 10 | Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid | XNone | |
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| None |
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| 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 current manuscript only. |
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| 2 | Grants or contracts from | X_None | |
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| 3 | Royalties or licenses | X_None | |
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| 5 | Daymont or honoraria for | XNone | |
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| 6 | Payment for expert testimony | XNone | |
| | | | |
| 7 | Support for attending meetings and for travel | X None | |
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| 8 | Patents planned, issued | X_None | |
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| 9 | Participation on a Data Safety Monitoring Board or Advisory Board | XNone | |
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