

ICMJE DISCLOSURE FORM

Date: 8/15/2022

Your Name: Qingyu Zeng

Manuscript Title: Multimodality imaging findings of splenic littoral cell angioma: A case description and analysis of literature

Manuscript Number (if known): QJMS-22-897-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 author's relationships/activities/interests should be defined broadly. 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.

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Date: 8/15/2022

Your Name: Jia Liao

Manuscript Title: Multimodality imaging findings of splenic littoral cell angioma: A case description and analysis of literature

Manuscript Number (if known): QJMS-22-897-R1

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Date: 8/15/2022

Your Name: Yue Song

Manuscript Title: Multimodality imaging findings of splenic littoral cell angioma: A case description and analysis of literature

Manuscript Number (if known): QJMS-22-897-R1

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Your Name: Danqing Zhang

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Your Name: Hong Li

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Time frame: past 36 months								
2 Grants or contracts from any entity (if not indicated in item #1 above).	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; height: 40px; margin-top: 10px;"> <tr><td style="width: 50%;"></td><td style="width: 50%;"></td></tr> <tr><td style="width: 50%;"></td><td style="width: 50%;"></td></tr> </table>							

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4	Consulting fees	<input checked="" type="checkbox"/> None <table border="1" data-bbox="375 543 1507 678"> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>									
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7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> None <table border="1" data-bbox="375 1329 1507 1428"> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>									
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> None <table border="1" data-bbox="375 1547 1507 1646"> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>									
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ICMJE DISCLOSURE FORM

Date: 8/15/2022

Your Name: Jing Wang

Manuscript Title: Multimodality imaging findings of splenic littoral cell angioma: A case description and analysis of literature

Manuscript Number (if known): QIMS-22-897-R1

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