Date:	2022/12/6	<u></u>		
Your Name	:Yic	huan Wang		
Manuscript	t Title:Re	egional homogeneity alterations in multi-frequency bands in Extracranial Multi-		
organ tuberculosis Patients: a prospective cross-sectional study_				
Manuscript	t number (i	if known): QIMS-22-229-R2		

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

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parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment

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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)
	Ti	me frame: Since the initia	planning of the work
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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated	None	

	in item #1 above).		
3	Royalties or licenses	√None	
4	Consulting fees	None	
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5	Payment or honoraria for	$_$ _None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	√None	
	testimony		
7	Support for attending	None	
	meetings and/or travel		
8	Patents planned, issued	√ None	
U	or pending		
	or periang		
9	Participation on a Data	√ None	
Э	Safety Monitoring Board	VINOTIE	
	or Advisory Board		
10	•	√ None	
10	Leadership or fiduciary role in other board,	None	
	society, committee or		
	advocacy group, paid or		
	unpaid		
11	Stock or stock options	√ None	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		
	ease summarize the abo		the following box:

Date:	<u>2022/12/6</u>
Your Name	e:Jianjie
Wen	
Manuscrip	t Title: Regional homogeneity alterations in multi-frequency bands in Extracranial Multi
organ tube	erculosis Patients: a prospective cross-sectional study_
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4	Consulting lees	VNone	
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	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
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7	Support for attending meetings and/or travel	None	
8	Patents planned, issued	$_$ None	
	or pending		
9	Participation on a Data	$_$ None	
	Safety Monitoring Board		
	or Advisory Board		
10	Leadership or fiduciary	None	
	role in other board,		
	society, committee or advocacy group, paid or		
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12	Receipt of equipment,	$_$ None	
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	financial interests		
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Date:	2022/12/6
Your Name	e:Chengcheng
Kong	
Manuscrip	t Title:Regional homogeneity alterations in multi-frequency bands in Extracranial Multi-
organ tube	erculosis Patients: a prospective cross-sectional study_
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13	Other financial or non-	None	
	financial interests		
Pl	ease summarize the abo	ve conflict of interest	in the following box:
Γ	The author has no conflicts of	of interest to declare.	

Date: 2022/12/6				
Your Name: Zexuan Xu				
Manuscript Title: Regional homogeneity alterations in multi-frequency bands in Extracranial Mu	<u>ti-</u>			
organ tuberculosis Patients: a prospective cross-sectional study				
Manuscript number (if known): QIMS-22-229-R2				

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10	•	√ None	
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	society, committee or		
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	unpaid		
11	Stock or stock options	√ None	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		
	ease summarize the abo		the following box:

Date:	2022/12/6
Your Name	:Su Hu
Manuscript	Title: Regional homogeneity alterations in multi-frequency bands in Extracranial Multi-
organ tubei	rculosis Patients: a prospective cross-sectional study
Manuscript	number (if known): QIMS-22-229-R2

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9	Participation on a Data	√ None	
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	or Advisory Board		
10	•	√ None	
10	Leadership or fiduciary role in other board,	None	
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	unpaid		
11	Stock or stock options	√ None	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		
	ease summarize the abo		the following box:

Date:2022/12/6
Your Name: Mengting
<u>Li</u>
Manuscript Title: Regional homogeneity alterations in multi-frequency bands in Extracranial Multi-
organ tuberculosis Patients: a prospective cross-sectional study_
Manuscript number (if known): QIMS-22-229-R2

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3	Royalties or licenses	None	
4	Consulting fees	√ None	
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5	Payment or honoraria for	√ None	
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	manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
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7	Support for attending meetings and/or travel	None	
8	Patents planned, issued	$_$ None	
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	or Advisory Board		
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	materials, drugs, medical		
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13	Other financial or non-	None	
	financial interests		
Pl	ease summarize the abo	ve conflict of interest	in the following box:
Γ	The author has no conflicts of	of interest to declare.	

Date:	2022/12/6
Your Name	: Xinguang
Wang	
Manuscript	Title:Regional homogeneity alterations in multi-frequency bands in Extracranial Multi-
organ tube	rculosis Patients: a prospective cross-sectional study_
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0	in item #1 above).	. / None	
3	Royalties or licenses	None	
4	Consulting fees	√ None	
4	Consulting lees	VNone	
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7	Support for attending meetings and/or travel	None	
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	financial interests		
Pl	ease summarize the abo	ve conflict of interest	in the following box:
Γ	The author has no conflicts of	of interest to declare.	

Date:	2022/12/6
Your Name:	<u>Hongqiang</u>
<u>Zhang</u>	
Manuscript	Title: Regional homogeneity alterations in multi-frequency bands in Extracranial Multi-
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Manuscript	number (if known): QIMS-22-229-R2

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Date:	2022/12/6			
Your Name	:Xize Jia			
Manuscript	Title: Regional homogeneity alterations in multi-frequency bands in Extracranial Multi-			
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11	Stock or stock options	√ None	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		
	ease summarize the abo		the following box:

Date:	_2022/12/6
Your Nam	e: Qingguo
Ding	
Manuscrip	ot Title: Regional homogeneity alterations in multi-frequency bands in Extracranial Multi-
organ tub	erculosis Patients: a prospective cross-sectional study_
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Pl	ease summarize the abo	ve conflict of interest	in the following box:
Γ	The author has no conflicts of	of interest to declare.	

Date:	2022/12/6			
Your Name	:Jili Wu			
Manuscript	Title: Regional homogeneity alterations in multi-frequency bands in Extracranial Multi-			
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5	Payment or honoraria for	$_$ _None	
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	manuscript writing or		
	educational events		
6	Payment for expert	√None	
	testimony		
7	Support for attending	None	
	meetings and/or travel		
8	Patents planned, issued	√ None	
U	or pending		
	or periang		
9	Participation on a Data	√ None	
Э	Safety Monitoring Board	VINOTIE	
	or Advisory Board		
10	•	√ None	
10	Leadership or fiduciary role in other board,	None	
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