Date: <u>Feb. 6<sup>th</sup>, 2023</u>	
Your Name: <u>Caiyun Shi</u>	
Manuscript Title: <u>High e</u>	fficiency 3D Black Blood Thoracic Aorta Imaging with Patch Based Low-Rank Tensor
Reconstruction	
Manuscript number (if known	): QIMS-22-702-R3

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.

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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, 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).	XNone	
3	Royalties or licenses	XNone	
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 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	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X None	
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12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
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None			

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

Date:Feb. 6 <sup>th</sup> , 2023
Your Name: Yuanyuan Liu
Manuscript Title: High efficiency 3D Black Blood Thoracic Aorta Imaging with Patch Based Low-Rank Tensor
Reconstruction
Manuscript number (if known): QIMS-22-702-R3

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3	Royalties or licenses	XNone	
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 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	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X None	
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12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
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None			

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

Date:	Feb. 6 <sup>th</sup> , 2023	_		
Your Nar	me: Guanxu Chen	1g		
Manuscr	ipt Title: High	efficiency 3D Black Blood	<mark>d Thoracic Aorta Imaging wit</mark> h	n Patch Based Low-Rank Tensor
Reconstr	uction			
Manuscr	ipt number (if knowr	n):QIMS-22-702-R	3	

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3	Royalties or licenses	XNone	
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 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	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X None	
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12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
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None			

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

Date: <u>Feb. 6<sup>th</sup>, 2023</u>	
Your Name: Yulong Qi	
Manuscript Title: High e	<u>iciency 3D Black Blood Thoracic Aorta Imaging with Patch Based Low-Rank Tenso</u>
Reconstruction	
Manuscript number (if known	QIMS-22-702-R3

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		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	

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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 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	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X None	
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12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
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None			

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

Date: <u>Feb. 6<sup>th</sup>, 2023</u>	
Your Name: <u>Haifeng Wang</u>	
Manuscript Title: High efficien	cy 3D Black Blood Thoracic Aorta Imaging with Patch Based Low-Rank Tensor
Reconstruction	
Manuscript number (if known):	QIMS-22-702-R3

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		Time frame: past	36 months
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3	Royalties or licenses	XNone	
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 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	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X None	
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12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
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None			

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

Date:	Feb. 6 <sup>th</sup> , 202	23				
Your Nar	me: Xin Liu					
Manuscr	ipt Title:	High efficien	cy 3D Black Blood T	horacic Aorta Imaging	g with Patch Base	ed Low-Rank Tensor
Reconstr	uction					
Manuscr	ipt number (if	known):	QIMS-22-702-R3_			

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	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or	XNone	
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	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	
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12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
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None			

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

Date: <u>Feb. 6<sup>th</sup>, 2023</u>	
Your Name: Dong Liang	
Manuscript Title: High eff	iciency 3D Black Blood Thoracic Aorta Imaging with Patch Based Low-Rank Tensor
Reconstruction	
Manuscript number (if known):	QIMS-22-702-R3

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3	Royalties or licenses	XNone	
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	
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7	Support for attending meetings and/or travel	XNone	
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8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	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	
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12	Receipt of equipment,	X_None	
<del></del>	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

None			

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

Date:	Feb. 6 <sup>th</sup> , 20	23					
Your Na	me: Yanjie	Zhu_					
Manuscr	ript Title:	High efficience	cy 3D Black Blood 1	<b>Shoracic Aorta</b>	<b>Imaging with Patch</b>	Based Low-Rank Te	ensor
Reconsti	ruction						
Manuscr	ript number (if	known):	QIMS-22-702-R3				

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	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
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