

## ICMJE DISCLOSURE FORM

Date: 4/16/2023

Your Name: Wei Liu

Manuscript Title: Differentiation of Bladder Cancer Stages Using Vesical Imaging -Reporting And Data System And Apparent Diffusion Coefficient

Manuscript number (if known): QIMS-22-1184

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.

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.

		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)
<b>Time frame: Since the initial planning of the work</b>			
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) <b>No time limit for this item.</b>	<u>Wei Liu</u> None	
<b>Time frame: past 36 months</b>			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<u>Wei Liu</u> None	
3	Royalties or licenses	<u>Wei Liu</u> None	
4	Consulting fees	<u>Wei Liu</u> None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<u>Wei Liu</u> None	
6	Payment for expert testimony	<u>Wei Liu</u> None	
7	Support for attending meetings and/or travel	<u>Wei Liu</u> None	
8	Patents planned, issued or pending	<u>Wei Liu</u> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<u>Wei Liu</u> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<u>Wei Liu</u> None	
11	Stock or stock options	<u>Wei Liu</u> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<u>Wei Liu</u> None	
13	Other financial or non-financial interests	<u>Wei Liu</u> None	

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

None

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

**\_Wei Liu\_ 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: 4/16/2023  
 Your Name: Ruchuan Chen  
 Manuscript Title: Differentiation of Bladder Cancer Stages Using Vesical Imaging -Reporting And Data System And Apparent Diffusion Coefficient  
 Manuscript number (if known): QIMS-22-1184

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1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) <b>No time limit for this item.</b>	<u> Ruchuan Chen </u> None	
<b>Time frame: past 36 months</b>			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<u> Ruchuan Chen </u> None	
3	Royalties or licenses	<u> Ruchuan Chen </u> None	
4	Consulting fees	<u> Ruchuan Chen </u> None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<u>  Ruchuan Chen  </u> None	
6	Payment for expert testimony	<u>  Ruchuan Chen  </u> None	
7	Support for attending meetings and/or travel	<u>  Ruchuan Chen  </u> None	
8	Patents planned, issued or pending	<u>  Ruchuan Chen  </u> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<u>  Ruchuan Chen  </u> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<u>  Ruchuan Chen  </u> None	
11	Stock or stock options	<u>  Ruchuan Chen  </u> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<u>  Ruchuan Chen  </u> None	
13	Other financial or non-financial interests	<u>  Ruchuan Chen  </u> None	

**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:**

**\_Ruchuan Chen\_ 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: 4/16/2023  
 Your Name: Xiaohang Liu  
 Manuscript Title: Differentiation of Bladder Cancer Stages Using Vesical Imaging -Reporting And Data System And Apparent Diffusion Coefficient  
 Manuscript number (if known): QIMS-22-1184

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<b>Time frame: Since the initial planning of the work</b>			
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) <b>No time limit for this item.</b>	<u>Xiaohang Liu</u> <u>None</u>	
<b>Time frame: past 36 months</b>			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<u>Xiaohang Liu</u> <u>None</u>	
3	Royalties or licenses	<u>Xiaohang Liu</u> <u>None</u>	
4	Consulting fees	<u>Xiaohang Liu</u> <u>None</u>	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<u>  </u> Xiaohang Liu <u>  </u> None	
6	Payment for expert testimony	<u>  </u> Xiaohang Liu <u>  </u> None	
7	Support for attending meetings and/or travel	<u>  </u> Xiaohang Liu <u>  </u> None	
8	Patents planned, issued or pending	<u>  </u> Xiaohang Liu <u>  </u> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<u>  </u> Xiaohang Liu <u>  </u> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<u>  </u> Xiaohang Liu <u>  </u> None	
11	Stock or stock options	<u>  </u> Xiaohang Liu <u>  </u> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<u>  </u> Xiaohang Liu <u>  </u> None	
13	Other financial or non-financial interests	<u>  </u> Xiaohang Liu <u>  </u> None	

**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:**



**\_Xiaohang Liu\_ 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: 4/16/2023  
 Your Name: Bingni Zhou  
 Manuscript Title: Differentiation of Bladder Cancer Stages Using Vesical Imaging - Reporting And Data System And Apparent Diffusion Coefficient  
 Manuscript number (if known): QIMS-22-1184

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

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1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) <b>No time limit for this item.</b>	<u>Bingni Zhou</u> None	
<b>Time frame: past 36 months</b>			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<u>Bingni Zhou</u> None	
3	Royalties or licenses	<u>Bingni Zhou</u> None	
4	Consulting fees	<u>Bingni Zhou</u> None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<u>  Bingni Zhou  </u> None	
6	Payment for expert testimony	<u>  Bingni Zhou  </u> None	
7	Support for attending meetings and/or travel	<u>  Bingni Zhou  </u> None	
8	Patents planned, issued or pending	<u>  Bingni Zhou  </u> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<u>  Bingni Zhou  </u> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<u>  Bingni Zhou  </u> None	
11	Stock or stock options	<u>  Bingni Zhou  </u> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<u>  Bingni Zhou  </u> None	
13	Other financial or non-financial interests	<u>  Bingni Zhou  </u> None	

**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:**

**\_Bingni Zhou\_ 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: 4/16/2023  
 Your Name: Yijun Shen  
 Manuscript Title: Differentiation of Bladder Cancer Stages Using Vesical Imaging -Reporting And Data System And Apparent Diffusion Coefficient  
 Manuscript number (if known): QIMS-22-1184

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1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) <b>No time limit for this item.</b>	<u>_ Yijun Shen ___ None</u>	
<b>Time frame: past 36 months</b>			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<u>_ Yijun Shen ___ None</u>	
3	Royalties or licenses	<u>_ Yijun Shen ___ None</u>	
4	Consulting fees	<u>_ Yijun Shen ___ None</u>	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<u>  </u> Yijun Shen <u>  </u> None	
6	Payment for expert testimony	<u>  </u> Yijun Shen <u>  </u> None	
7	Support for attending meetings and/or travel	<u>  </u> Yijun Shen <u>  </u> None	
8	Patents planned, issued or pending	<u>  </u> Yijun Shen <u>  </u> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<u>  </u> Yijun Shen <u>  </u> None	
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11	Stock or stock options	<u>  </u> Yijun Shen <u>  </u> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<u>  </u> Yijun Shen <u>  </u> None	
13	Other financial or non-financial interests	<u>  </u> Yijun Shen <u>  </u> None	

**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:**

**\_Yijun Shen\_ 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: 4/16/2023  
 Your Name: Liangping Zhou  
 Manuscript Title: Differentiation of Bladder Cancer Stages Using Vesical Imaging -Reporting And Data System And Apparent Diffusion Coefficient  
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3	Royalties or licenses	<u>Liaping Zhou</u> None	
4	Consulting fees	<u>Liaping Zhou</u> None	



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6	Payment for expert testimony	<u>Liaping Zhou</u> None	
7	Support for attending meetings and/or travel	<u>Liaping Zhou</u> None	
8	Patents planned, issued or pending	<u>Liaping Zhou</u> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<u>Liaping Zhou</u> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<u>Liaping Zhou</u> None	
11	Stock or stock options	<u>Liaping Zhou</u> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<u>Liaping Zhou</u> None	
13	Other financial or non-financial interests	<u>Liaping Zhou</u> None	

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None

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