

## ICMJE DISCLOSURE FORM

Date: \_\_\_\_\_ May. 8<sup>th</sup>, 2023 \_\_\_\_\_  
 Your Name: \_\_\_\_\_ Lianghua Li \_\_\_\_\_  
 Manuscript Title: \_\_\_\_\_ Biodistribution and Radiation Dosimetry of Multiple Tracers on Total-body PET/CT \_\_\_\_\_  
 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 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) |
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 Your Name: \_\_\_\_\_ Jianjun Liu \_\_\_\_\_  
 Manuscript Title: \_\_\_\_\_ Biodistribution and Radiation Dosimetry of Multiple Tracers on Total-body PET/CT \_  
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