ICMJE DISCLOSURE FORM

Date:_____Aug. 17th, 2023____
Your Name:___ Hyunmin Kim __
Manuscript Title:_Deep-learning Model for Diagnostic Clue: Detecting the Dural Tail Sign for Meningiomas on contrast-enhanced T1 weighted images____
Manuscript number (if known):_QIMS-23-114-R2_____

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

The author's relationships/activities/interests should be <u>defined broadly</u>. 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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		Time frame: Since the initial planning of the work	
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3	Royalties or licenses	__X__None	
4	Consulting fees	__X__None	

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9	Participation on a Data Safety Monitoring Board or Advisory Board	__X__None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	__X__None	
11	Stock or stock options	__X__None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	__X_None	
13	Other financial or non-financial interests	__X__None	

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

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

__X_ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

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