

ICMJE DISCLOSURE FORM

Date: Jul.25th,2023

Your Name: JinghuaChen

Manuscript Title: Quantitative parameters of dual-layer detector spectral CT evaluation of Ki-67 and HER2 expression in colorectal adenocarcinoma

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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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:

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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Date: Jul.25th,2023

Your Name: Liang Tang

Manuscript Title: Quantitative parameters of dual-layer detector spectral CT evaluation of Ki-67 and HER2 expression in colorectal adenocarcinoma

Manuscript number (if known): _____

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Date: Jul.25th,2023

Your Name: Ping Xie

Manuscript Title: Quantitative parameters of dual-layer detector spectral CT evaluation of Ki-67 and HER2 expression in colorectal adenocarcinoma

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Date: Jul.25th,2023

Your Name: Tingting Qian

Manuscript Title: Quantitative parameters of dual-layer detector spectral CT evaluation of Ki-67 and HER2 expression in colorectal adenocarcinoma

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Date: Jul.25th,2023

Your Name: Jian Huang

Manuscript Title: Quantitative parameters of dual-layer detector spectral CT evaluation of Ki-67 and HER2 expression in colorectal adenocarcinoma

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Date: Jul.25th,2023

Your Name: Kefu Liu

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