

ICMJE DISCLOSURE FORM

Date: 20/04/2024
 Your Name: Jinhui Li
 Manuscript Title: MRI-based prognostic model for subsequent distant metastasis in patients with ipsilateral breast tumor recurrence following breast-conserving surgery
 Manuscript number (if known): QIMS-23-1831-R1

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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Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	

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

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

<p>No conflict of interest</p> <p><i>Jinhui Li</i></p>
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Please place an "X" next to the following statement to indicate your agreement:

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

ICMJE DISCLOSURE FORM

Date: 20/04/2024
 Your Name: Feilin Qu
 Manuscript Title: MRI-based prognostic model for subsequent distant metastasis in patients with ipsilateral breast tumor recurrence following breast-conserving surgery
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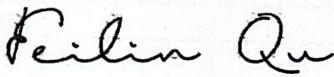
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ICMJE DISCLOSURE FORM

Date: 20/04/2024
 Your Name: Jing Gong
 Manuscript Title: MRI-based prognostic model for subsequent distant metastasis in patients with ipsilateral breast tumor recurrence following breast-conserving surgery
 Manuscript number (if known): QIMS-23-1831-R1

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ICMJE DISCLOSURE FORM

Date: 20/04/2024

Your Name: Shiyun Sun

Manuscript Title: MRI-based prognostic model for subsequent distant metastasis in patients with ipsilateral breast tumor recurrence following breast-conserving surgery

Manuscript number (if known): QIMS-23-1831-R1

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ICMJE DISCLOSURE FORM

Date: 20/04/2024
 Your Name: Yajia Gu
 Manuscript Title: MRI-based prognostic model for subsequent distant metastasis in patients with ipsilateral breast tumor recurrence following breast-conserving surgery
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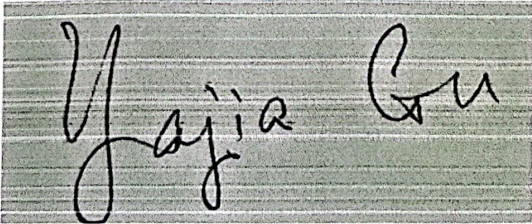
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Date: 20/04/2024

Your Name: Chao You

Manuscript Title: MRI-based prognostic model for subsequent distant metastasis in patients with ipsilateral breast tumor recurrence following breast-conserving surgery

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Date: 20/04/2024
 Your Name: Weijun Peng
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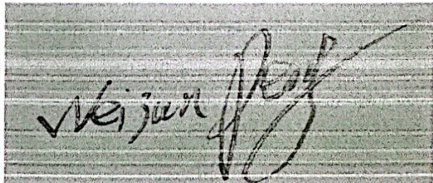
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