

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

#### 1. Identifying information.

#### 2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

#### 3. Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

#### 4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

#### 5. Relationships not covered above.

Use this section to report other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work.

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**Other:** Anything not covered under the previous three boxes

**Pending:** The patent has been filed but not issued

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**Royalties:** Funds are coming in to you or your institution due to your patent

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Benjamin      2. Surname (Last Name) Ecclestone      3. Date 10-August-2020

4. Are you the corresponding author?     Yes     No      Corresponding Author's Name  
Parsin Haji Reza

5. Manuscript Title  
Towards virtual biopsies of gastrointestinal tissues using photoacoustic remote sensing microscopy

6. Manuscript Identifying Number (if you know it)  
ID QIMS-20-722

### Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest?     Yes     No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

| Name of Institution/Company | Grant?                              | Personal Fees?           | Non-Financial Support?   | Other?                   | Comments |
|-----------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|----------|
| illumiSonics Inc.           | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| NSERC                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| Mitacs                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| New frontiers in research   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| CFI                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |

### Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest?     Yes     No

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### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

### Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

- Yes, the following relationships/conditions/circumstances are present (explain below):
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Dr. Ecclestone reports grants from illumiSonics Inc., grants from NSERC, grants from Mitacs, grants from New frontiers in research, grants from CFI, during the conduct of the study; .

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Saad

2. Surname (Last Name)  
Abbasi

3. Date  
30-July-2020

4. Are you the corresponding author?  Yes  No  
Corresponding Author's Name  
Parsin Haji Reza

5. Manuscript Title  
Towards virtual biopsies of gastrointestinal tissues using photoacoustic remote sensing microscopy

6. Manuscript Identifying Number (if you know it)  
QIMS-20-722

### Section 2. The Work Under Consideration for Publication

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| CFI                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| New frontiers in research   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| NSERC                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| Mitacs                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| illumiSonics Inc.           | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |

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Are there any relevant conflicts of interest?  Yes  No

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Dr. Abbasi reports grants from CFI, grants from New frontiers in research, grants from NSERC, grants from Mitacs, grants from illumiSonics Inc., during the conduct of the study; .

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Kevan

2. Surname (Last Name)  
Bell

3. Date  
10-August-2020

4. Are you the corresponding author?  Yes  No  
Corresponding Author's Name  
Parsin Haji Reza

5. Manuscript Title  
Towards virtual biopsies of gastrointestinal tissues using photoacoustic remote sensing microscopy

6. Manuscript Identifying Number (if you know it)  
QIMS-20-722-R1

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Are there any relevant conflicts of interest?  Yes  No

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| Name of Institution/Company | Grant?                              | Personal Fees?                      | Non-Financial Support?              | Other?                              | Comments                   |
|-----------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|----------------------------|
| illumiSonics Inc.           | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Shareholder and contractor |
| NSERC                       | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |                            |
| Mitacs                      | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |                            |
| New frontiers in research   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |                            |
| CFI                         | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |                            |

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Are there any relevant conflicts of interest?  Yes  No

If yes, please fill out the appropriate information below.



## ICMJE Form for Disclosure of Potential Conflicts of Interest

| Name of Entity    | Grant?                   | Personal Fees?           | Non-Financial Support?   | Other?                              | Comments      |
|-------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|---------------|
| illumiSonics Inc. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Contract Work |

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

| Patent?   | Pending?                            | Issued?                             | Licensed?                | Royalties?               | Licensee? | Comments            |
|---|-------------------------------------|-------------------------------------|--------------------------|--------------------------|-----------|---------------------|
| US10117583B2  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |           | A family of patents |
| US20190320908A1   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |           | A family of patents |
| US20180275046A1   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |           | A family of patents |
| WO2019145764A1  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> |           | A family of patents |
| I am not willing to disclose my other pending and planned IPs until they are publicly available | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> |           |                     |

### Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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Dr. Bell reports grants, personal fees, non-financial support and other from illumiSonics Inc., grants from NSERC, grants from Mitacs, grants from New frontiers in research, grants from CFI, during the conduct of the study; other from illumiSonics Inc., outside the submitted work; In addition, Dr. Bell has a patent US10117583B2 issued, a patent US20190320908A1 issued, a patent US20180275046A1 issued, a patent WO2019145764A1 pending, and a patent I am not willing to disclose my other pending and planned IPs until they are publicly available pending.

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1. Given Name (First Name) Deepak      2. Surname (Last Name) Dinakaran      3. Date 30-July-2020

4. Are you the corresponding author?     Yes     No      Corresponding Author's Name  
Parsin Haji Reza

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| Name of Entity    | Grant?                   | Personal Fees?           | Non-Financial Support?   | Other?                              | Comments            |
|-------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|---------------------|
| illumisonics inc. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Investor in company |

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?     Yes     No

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Dr. Dinakaran reports other from illumisonics inc., outside the submitted work; .

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#### 4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

#### 5. Relationships not covered above.

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#### Definitions.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

|   |   |  |
|---|---|--|
| 1. Given Name (First Name)<br>Gilbert   | 2. Surname (Last Name)<br>Bigras                                    | 3. Date<br>04-August-2020                          |
| 4. Are you the corresponding author?  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name<br>Benjamin Ecclestone |
| 5. Manuscript Title<br>Towards virtual biopsies of gastrointestinal tissues using photoacoustic remote sensing microscopy |   |  |
| 6. Manuscript Identifying Number (if you know it)<br>QIMS 20-722  |   |  |

### Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest?  Yes  No

### Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were **present during the 36 months prior to publication**.

Are there any relevant conflicts of interest?  Yes  No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No



## ICMJE Form for Disclosure of Potential Conflicts of Interest

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### Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

- Yes, the following relationships/conditions/circumstances are present (explain below):
- No other relationships/conditions/circumstances that present a potential conflict of interest

At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

### Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Bigras has nothing to disclose.

### Evaluation and Feedback

Please visit <http://www.icmje.org/cgi-bin/feedback> to provide feedback on your experience with completing this form.

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

#### 1. Identifying information.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
John

2. Surname (Last Name)  
Mackey

3. Date  
03-August-2020

4. Are you the corresponding author?  Yes  No  
Corresponding Author's Name  
Parsin Haji Reza

5. Manuscript Title  
Towards virtual biopsies of gastrointestinal tissues using photoacoustic remote sensing microscopy

6. Manuscript Identifying Number (if you know it)  
ID QIMS-20-722

### Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?  Yes  No

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Are there any relevant conflicts of interest?  Yes  No

If yes, please fill out the appropriate information below.

| Name of Entity    | Grant?                   | Personal Fees?           | Non-Financial Support?   | Other?                              | Comments                           |
|-------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|------------------------------------|
| illumiSonics Inc. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | shareholder and corporate director |

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Mackey reports other from illumiSonics Inc., from null, outside the submitted work; .

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**Royalties:** Funds are coming in to you or your institution due to your patent

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) \_\_\_\_\_ Parsin

2. Surname (Last Name) \_\_\_\_\_ Haji Reza

3. Date \_\_\_\_\_ 10-August-2020

4. Are you the corresponding author?  Yes  No

5. Manuscript Title  
Towards virtual biopsies of gastrointestinal tissues using photoacoustic remote sensing microscopy

6. Manuscript Identifying Number (if you know it)  
\_\_\_\_\_

### Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest?  Yes  No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

| Name of Institution/Company | Grant?                              | Personal Fees?                      | Non-Financial Support?              | Other?                              | Comments                          |
|-----------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-----------------------------------|
| illumiSonics Inc.           | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Founder, shareholder and director |
| NSERC                       | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |                                   |
| Mitacs                      | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |                                   |
| New frontiers in research   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |                                   |
| CFI                         | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |                                   |

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

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| Patent?   | Pending?                            | Issued?                             | Licensed?                | Royalties?               | Licensee? | Comments            |
|---|-------------------------------------|-------------------------------------|--------------------------|--------------------------|-----------|---------------------|
| US10117583B2  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |           | A family of patents |
| US20190320908A1   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |           | A family of patents |
| US20180275046A1   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |           | A family of patents |
| WO2019145764A1  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> |           | A family of patents |
| I am not willing to disclose my other pending and planned IPs until they are publicly available | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> |           |                     |

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