

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

YANTAO

2. Surname (Last Name)

NIU

3. Date

31-May-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

JUNFANG XIAN

5. Manuscript Title

The Optimization of Imaging Parameters in Chest CT for COVID-19 Patients  
--- Experimental Phantom Study

6. Manuscript Identifying Number (if you know it)

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Dr. NIU has nothing to disclose.

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1. Given Name (First Name) Shun-Xing	2. Surname (Last Name) Huang	3. Date 31-May-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name JUNFANG XIAN
5. Manuscript Title The Optimization of Imaging Parameters in Chest CT for COVID-19 Patients --- Experimental Phantom Study		
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1. Given Name (First Name) Huan	2. Surname (Last Name) Zhang	3. Date 31-May-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name JUNFANG XIAN
5. Manuscript Title The Optimization of Imaging Parameters in Chest CT for COVID-19 Patients --- Experimental Phantom Study		
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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Zhi-Bin

2. Surname (Last Name)

Lv

3. Date

31-May-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

JUNFANG XIAN

5. Manuscript Title

The Optimization of Imaging Parameters in Chest CT for COVID-19 Patients  
--- Experimental Phantom Study

6. Manuscript Identifying Number (if you know it)

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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

### 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 6. Disclosure Statement

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Dr. Lv has nothing to disclose.

### 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)

Shuo

2. Surname (Last Name)

Yan

3. Date

31-May-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

JUNFANG XIAN

5. Manuscript Title

The Optimization of Imaging Parameters in Chest CT for COVID-19 Patients  
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Dr. Yan has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Wei

2. Surname (Last Name)

Fan

3. Date

31-May-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

JUNFANG XIAN

5. Manuscript Title

The Optimization of Imaging Parameters in Chest CT for COVID-19 Patients  
--- Experimental Phantom Study

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Dr. Fan has nothing to disclose.

### 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)

Yan-Long

2. Surname (Last Name)

Zhai

3. Date

31-May-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

JUNFANG XIAN

5. Manuscript Title

The Optimization of Imaging Parameters in Chest CT for COVID-19 Patients  
--- Experimental Phantom Study

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest?  Yes  No

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

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Zhai has nothing to disclose.

### Evaluation and Feedback

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Eddy

2. Surname (Last Name)

Wong

3. Date

31-May-2020

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Yes

No

Corresponding Author's Name

JUNFANG XIAN

5. Manuscript Title

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### Section 1. Identifying Information

1. Given Name (First Name)

Ke-Xin

2. Surname (Last Name)

Wang

3. Date

31-May-2020

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

JUNFANG XIAN

5. Manuscript Title

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Are there any relevant conflicts of interest?

Yes

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1. Given Name (First Name)

Zong-rui

2. Surname (Last Name)

Zhang

3. Date

31-May-2020

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

JUNFANG XIAN

5. Manuscript Title

The Optimization of Imaging Parameters in Chest CT for COVID-19 Patients  
--- Experimental Phantom Study

6. Manuscript Identifying Number (if you know it)

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### Section 1. Identifying Information

1. Given Name (First Name)

Bu-Dong

2. Surname (Last Name)

Chen

3. Date

31-May-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

JUNFANG XIAN

5. Manuscript Title

The Optimization of Imaging Parameters in Chest CT for COVID-19 Patients  
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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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Ru-Ming

2. Surname (Last Name)

Xie

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31-May-2020

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Yes  No

Corresponding Author's Name

JUNFANG XIAN

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1. Given Name (First Name)

Junfang

2. Surname (Last Name)

Xian

3. Date

31-May-2020

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Yes  No

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