ICMJE DISCLOSURE FORM

Date:_____24/02/2021_____

Your Name:_____ Ge Ren _____

Manuscript Title: Deep Learning-Based Bone Suppression in Chest Radiographs Using CT-Derived Features: A Feasibility Study

Manuscript number (if known):_____ QIMS-20-1230-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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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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1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) **No time limit for this item.**	_X_None	
		Time frame: past 36 months	
2	Grants or contracts from any entity (if not indicated in item #1 above).	_X_None	
3	Royalties or licenses	_X_None	
4	Consulting fees	_X_None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	_X__None	
6	Payment for expert testimony	_X_None	
7	Support for attending meetings and/or travel	_X_None	
8	Patents planned, issued or pending	_X__None	
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:

No conflict of interest.

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

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ICMJE DISCLOSURE FORM

Date:_____24/02/2021_____

Your Name:_____Haonan Xiao_____

Manuscript Title: Deep Learning-Based Bone Suppression in Chest Radiographs Using CT-Derived Features: A Feasibility Study

Manuscript number (if known):_____ QIMS-20-1230-R1_____

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4	Consulting fees	_X_None	

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ICMJE DISCLOSURE FORM

Date:_____24/02/2021_____

Your Name:_____Saikit Lam_____

Manuscript Title: Deep Learning-Based Bone Suppression in Chest Radiographs Using CT-Derived Features: A Feasibility Study

Manuscript number (if known):_____ QIMS-20-1230-R1_____

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3	Royalties or licenses	_X_None	
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6	Payment for expert testimony	_X_None	
7	Support for attending meetings and/or travel	_X_None	
8	Patents planned, issued or pending	_X__None	
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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	
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ICMJE DISCLOSURE FORM

Date:_____24/02/2021_____

Your Name:_____Dongrong Yang_____

Manuscript Title: Deep Learning-Based Bone Suppression in Chest Radiographs Using CT-Derived Features: A Feasibility Study

Manuscript number (if known):_____ QIMS-20-1230-R1_____

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colspan4	**Time frame: Since the initial planning of the work**		
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) **No time limit for this item.**	_X_None	
	**Time frame: past 36 months**		
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4	Consulting fees	_X_None	

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7	Support for attending meetings and/or travel	_X_None	
8	Patents planned, issued or pending	_X__None	
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	
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ICMJE DISCLOSURE FORM

Date:_____24/02/2021_____

Your Name:_____Tian Li_____

Manuscript Title: Deep Learning-Based Bone Suppression in Chest Radiographs Using CT-Derived Features: A Feasibility Study

Manuscript number (if known):_____ QIMS-20-1230-R1_____

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ICMJE DISCLOSURE FORM

Date:_____24/02/2021_____

Your Name:_____Xinzhi Teng_____

Manuscript Title: Deep Learning-Based Bone Suppression in Chest Radiographs Using CT-Derived Features: A Feasibility Study

Manuscript number (if known):_____ QIMS-20-1230-R1_____

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ICMJE DISCLOSURE FORM

Date:_____24/02/2021_____

Your Name:_____QIN, Jing_____

Manuscript Title: Deep Learning-Based Bone Suppression in Chest Radiographs Using CT-Derived Features: A Feasibility Study

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Your Name:_____CAI, Jing_____

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		Health and Medical Research Fund	HMRF 07183266, HMRF COVID190211
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