

## ICMJE DISCLOSURE FORM

Date: May 4, 2021

Your Name: Junhao Ma

Manuscript Title: Semi-quantitative research on degree of pathological hyperplasia of parathyroid gland using 99mTc-sestamibi SPECT/CT imaging

Manuscript number (if known): QIMS-21-66-R2

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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		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
<b>Time frame: Since the initial planning of the work</b>			
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) <b>No time limit for this item.</b>	Major contributed in	
		writing the manuscript,	
		collecting and analyzing	
		data	
<b>Time frame: past 36 months</b>			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<u>None</u>	
3	Royalties or licenses	<u>None</u>	
4	Consulting fees	<u>None</u>	

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

**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**

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## ICMJE DISCLOSURE FORM

Date: May 4, 2021

Your Name: Jun Yang

Manuscript Title: Semi-quantitative research on degree of pathological hyperplasia of parathyroid gland using 99mTc-sestamibi SPECT/CT imaging

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<b>Time frame: past 36 months</b>			
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3	Royalties or licenses	<u>None</u>	
4	Consulting fees	<u>None</u>	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<u>      </u> None	
6	Payment for expert testimony	<u>      </u> None	
7	Support for attending meetings and/or travel	<u>      </u> None	
8	Patents planned, issued or pending	<u>      </u> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<u>      </u> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<u>      </u> None	
11	Stock or stock options	<u>      </u> None	
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## ICMJE DISCLOSURE FORM

Date: May 4, 2021

Your Name: Chuanzhi Chen

Manuscript Title: Semi-quantitative research on degree of pathological hyperplasia of parathyroid gland using 99mTc-sestamibi SPECT/CT imaging

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1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) <b>No time limit for this item.</b>	Contributed in writing the manuscript and analyzing data	
<b>Time frame: past 36 months</b>			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<u>None</u>	
3	Royalties or licenses	<u>None</u>	
4	Consulting fees	<u>None</u>	

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## ICMJE DISCLOSURE FORM

Date: May 4, 2021

Your Name: Yimin Lu

Manuscript Title: Semi-quantitative research on degree of pathological hyperplasia of parathyroid gland using 99mTc-sestamibi SPECT/CT imaging

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		research, performing	
		research and analyzing	
		data	
<b>Time frame: past 36 months</b>			
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	___ None	
6	Payment for expert testimony	___ None	
7	Support for attending meetings and/or travel	___ None	
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9	Participation on a Data Safety Monitoring Board or Advisory Board	___ None	
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## ICMJE DISCLOSURE FORM

Date: May 4, 2021

Your Name: Zhuochao Mao

Manuscript Title: Semi-quantitative research on degree of pathological hyperplasia of parathyroid gland using 99mTc-sestamibi SPECT/CT imaging

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		research, performing	
		research, analyzing	
		Data and writing the manuscript	
<b>Time frame: past 36 months</b>			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<u>None</u>	
3	Royalties or licenses	<u>None</u>	
4	Consulting fees	<u>None</u>	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	___ None	
6	Payment for expert testimony	___ None	
7	Support for attending meetings and/or travel	___ None	
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## ICMJE DISCLOSURE FORM

Date: May 4, 2021

Your Name: Haohao Wang

Manuscript Title: Semi-quantitative research on degree of pathological hyperplasia of parathyroid gland using 99mTc-sestamibi SPECT/CT imaging

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		research and performing	
		research	
<b>Time frame: past 36 months</b>			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<u>None</u>	
3	Royalties or licenses	<u>None</u>	
4	Consulting fees	<u>None</u>	



5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	___ None	
6	Payment for expert testimony	___ None	
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## ICMJE DISCLOSURE FORM

Date: May 4, 2021

Your Name: Yan Yang

Manuscript Title: Semi-quantitative research on degree of pathological hyperplasia of parathyroid gland using 99mTc-sestamibi SPECT/CT imaging

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4	Consulting fees	<u>None</u>	

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6	Payment for expert testimony	___ None	
7	Support for attending meetings and/or travel	___ None	
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## ICMJE DISCLOSURE FORM

Date: May 4, 2021

Your Name: Zhongqi Li

Manuscript Title: Semi-quantitative research on degree of pathological hyperplasia of parathyroid gland using 99mTc-sestamibi SPECT/CT imaging

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## ICMJE DISCLOSURE FORM

Date: May 4, 2021

Your Name: Weibin Wang

Manuscript Title: Semi-quantitative research on degree of pathological hyperplasia of parathyroid gland using 99mTc-sestamibi SPECT/CT imaging

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1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) <b>No time limit for this item.</b>	Developed the idea for the study, analyzing data and revisioned the paper	
<b>Time frame: past 36 months</b>			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<u>None</u>	
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## ICMJE DISCLOSURE FORM

Date: May 4, 2021

Your Name: Lisong Teng

Manuscript Title: Semi-quantitative research on degree of pathological hyperplasia of parathyroid gland using 99mTc-sestamibi SPECT/CT imaging

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