Date	:	_2021-7-22_				
Ma	-		1 1		with Multiparametric Dual-energy Computed Tomograp	hy
of the Breast to Differentiate Between Benign and Malignant Lesions						
Man	uscript	t number (if	f known):	QIMS-21-39		
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	followi uscript		ns apply to	o the author's relationshi	ps/activities/interests as they relate to the <u>current</u>	
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				oort for the work reporte the past 36 months.	d in this manuscript without time limit. For all other items,	
				Name all entities with	Specifications/Comments	
				whom you have this	(e.g., if payments were made to you or to your	
				relationship or indicate	institution)	
				none (add rows as		
				needed)	ial planning of the work	
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1		port for the particular (e.g., fu		None		
		ion of study r				
		al writing, art				
		sing charges				
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				Time frame: pa	st 36 months	
2	any en	or contracts		None		
	ın item	n #1 above).				
3	Royalti	ies or license	S	None		

4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations,	None	
	speakers bureaus,		
	manuscript writing or educational events		
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	None	
	Advisory Board		
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10	Leadership or fiduciary role in other board, society,	None	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment, materials, drugs, medical	None	
	writing, gifts or other		
	services		
13	Other financial or non- financial interests	None	

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

Date:____2021-7-22_____

in item #1 above).

Royalties or licenses

____ None

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You	r Name:Xiaox	ia Wang						
			with Multiparametric Dual-energy Computed Tomo	graphy				
		_	d Malignant Lesions					
Mai	Manuscript number (if known): QIMS-21-39							
				-				
In th	ne interest of transparency.	we ask you to disclose all	relationships/activities/interests listed below that are					
	elated to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third arties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment							
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In it	em #1 below, report all sup	port for the work reporte	d in this manuscript without time limit. For all other it	ems,				
the	time frame for disclosure is	the past 36 months.	·					
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		Name all entities with	Specifications/Comments					
		whom you have this	(e.g., if payments were made to you or to your					
		relationship or indicate	institution)					
		none (add rows as needed)						
		Time frame: Since the initi	al planning of the work					
1	All support for the present		ai plaining of the work					
1	manuscript (e.g., funding,	None						
	provision of study materials,							
	medical writing, article							
	processing charges, etc.)							
	No time limit for this item.							
		Time frame: pas	t 36 months					
2	Grants or contracts from	None						
	any entity (if not indicated							

4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations,	None	
	speakers bureaus,		
	manuscript writing or educational events		
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	None	
	Advisory Board		
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10	Leadership or fiduciary role in other board, society,	None	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment, materials, drugs, medical	None	
	writing, gifts or other		
	services		
13	Other financial or non- financial interests	None	

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

Date:____2021-7-22_____

Υοι	ır Name: Jun Qi		
M	anuscript Title: Application	on of Machine Learning	with Multiparametric Dual-energy Computed Tomography
	of the Breast to Different	iate Between Benign and	d Malignant Lesions
Ma	nuscript number (if known):	QIMS-21-39	
In t	he interest of transparency,	we ask you to disclose all	relationships/activities/interests listed below that are
		-	ans any relation with for-profit or not-for-profit third
		-	of the manuscript. Disclosure represents a commitment
to t	ransparency and does not no	ecessarily indicate a bias.	If you are in doubt about whether to list a
rela	tionship/activity/interest, it	t is preferable that you do	O SO.
The	following questions annly t	o the author's relationshi	ps/activities/interests as they relate to the <u>current</u>
	nuscript only.	o the author's relationshi	ps/activities/interests as they relate to the <u>current</u>
The	author's relationships/activ	vities/interests should be	defined broadly. For example, if your manuscript pertains
	· • • • • • • • • • • • • • • • • • • •	· •	all relationships with manufacturers of antihypertensive
me	dication, even if that medica	tion is not mentioned in t	the manuscript.
		-	d in this manuscript without time limit. For all other items,
the	time frame for disclosure is	the past 36 months.	
		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
		none (add rows as	
		needed)	
	T	Time frame: Since the initi	al planning of the work
1	All support for the present	None	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article processing charges, etc.)		
	No time limit for this item.		
		Time frame: pas	st 36 months
2	Grants or contracts from	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	

4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations,	None	
	speakers bureaus,		
	manuscript writing or educational events		
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	None	
	Advisory Board		
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10	Leadership or fiduciary role in other board, society,	None	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment, materials, drugs, medical	None	
	writing, gifts or other		
	services		
13	Other financial or non- financial interests	None	

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

Date:____2021-7-22_____

Royalties or licenses

___ None

	r Name: Huifa					
Ma	nuscript Title: Application	on of Machine Learning	with Multiparametric Dual-energy Computed Tomography			
	of the Breast to Differentiate Between Benign and Malignant Lesions					
Mar	lanuscript number (if known):QIMS-21-39					
rela part to ti	ted to the content of your miles whose interests may be	nanuscript. "Related" mea affected by the content o ecessarily indicate a bias.	relationships/activities/interests listed below that are ans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment of the same in doubt about whether to list a so.			
	following questions apply to uscript only.	o the author's relationshi	ps/activities/interests as they relate to the <u>current</u>			
to tl med In it	ne epidemiology of hyperter lication, even if that medica	nsion, you should declare tion is not mentioned in t port for the work reporte	defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive the manuscript. d in this manuscript without time limit. For all other items,			
		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)			
		Time frame: Since the initia	al planning of the work			
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article	None				
	processing charges, etc.) No time limit for this item.					
		Time frame: pas	st 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	None				

4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations,	None	
	speakers bureaus,		
	manuscript writing or educational events		
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	None	
	Advisory Board		
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10	Leadership or fiduciary role in other board, society,	None	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment, materials, drugs, medical	None	
	writing, gifts or other		
	services		
13	Other financial or non- financial interests	None	

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

Date:____2021-7-22__

You	r Name: Xian	gfei Zeng				
Ma	nuscript Title: Application	on of Machine Learning	with Multiparametric Dual-energy Computed Tomograph			
	of the Breast to Differentiate Between Benign and Malignant Lesions					
Mar	Manuscript number (if known):QIMS-21-39					
rela part to ti	ted to the content of your n ies whose interests may be	nanuscript. "Related" mea affected by the content o ecessarily indicate a bias.	relationships/activities/interests listed below that are ans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment of you are in doubt about whether to list a so.			
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	em #1 below, report all sup time frame for disclosure is	-	d in this manuscript without time limit. For all other items,			
		Name all entities with	Specifications/Comments			
		whom you have this	(e.g., if payments were made to you or to your			
		relationship or indicate	institution)			
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		needed)				
		Time frame: Since the initial	al planning of the work			
1	All support for the present	None				
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	provision of study materials,					
	medical writing, article processing charges, etc.)					
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		Time frame: pas	et 36 months			
2	Grants or contracts from any entity (if not indicated	None				
	in item #1 above).					
2	Royalties or licenses	None				

4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations,	None	
	speakers bureaus,		
	manuscript writing or educational events		
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	None	
	Advisory Board		
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10	Leadership or fiduciary role in other board, society,	None	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment, materials, drugs, medical	None	
	writing, gifts or other		
	services		
13	Other financial or non- financial interests	None	

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

		2021-7-22			
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Ma					g with Multiparametric Dual-energy Computed Tomography
					nd Malignant Lesions
Man	uscrip	t number (if	known):	QIMS-21-39	-
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				Name all entities with	Specifications/Comments
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3	Royalt	ies or license	S	None	

4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations,	None	
	speakers bureaus,		
	manuscript writing or educational events		
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	None	
	Advisory Board		
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10	Leadership or fiduciary role in other board, society,	None	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment, materials, drugs, medical	None	
	writing, gifts or other		
	services		
13	Other financial or non- financial interests	None	

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

		2021-7-22				
Your	· Name	:	Daih	ong Liu		
Ma					with Multiparametric Dual-energy Computed Tomography	
				_	d Malignant Lesions	
Man	uscript	t number (if	known):	QIMS-21-39		
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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.					
				Name all entities with	Specifications/Comments	
				whom you have this	(e.g., if payments were made to you or to your	
				relationship or indicate	institution)	
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				Time frame: Since the initi	al planning of the work	
1	-	port for the		None		
	manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)		_			
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				Time frame: pa	st 36 months	
2	Grants or contracts from		-	None		
	•	any entity (if not indicated in item #1 above).				
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3	Royalti	ies or license	S	None		

4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations,	None	
	speakers bureaus,		
	manuscript writing or educational events		
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	None	
	Advisory Board		
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10	Leadership or fiduciary role in other board, society,	None	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment, materials, drugs, medical	None	
	writing, gifts or other		
	services		
13	Other financial or non- financial interests	None	

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

Date	e:	_2021-7-22_			
Ma	-		1 1		with Multiparametric Dual-energy Computed Tomography
					d Malignant Lesions
Man	uscrip	t number (if	f known):	QIMS-21-39	
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	followi uscript		ns apply to	o the author's relationshi	ips/activities/interests as they relate to the <u>current</u>
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				oort for the work reporte the past 36 months.	ed in this manuscript without time limit. For all other items,
				Name all entities with	Specifications/Comments
				whom you have this	(e.g., if payments were made to you or to your
				relationship or indicate	institution)
				none (add rows as	
				needed)	
_	- 11			Time frame: Since the initi	ial 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.		-	None	
			nis item.		
				Time frame: pa	st 26 months
2	Grants	or contracts	from	None	st 30 months
-	any entity (if not indicated				
	-	n #1 above).			
3	Royalt	ies or license	S	None	

4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations,	None	
	speakers bureaus,		
	manuscript writing or educational events		
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	None	
	Advisory Board		
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10	Leadership or fiduciary role in other board, society,	None	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment, materials, drugs, medical	None	
	writing, gifts or other		
	services		
13	Other financial or non- financial interests	None	

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		2021-7-22			
Ma					with Multiparametric Dual-energy Computed Tomography
					d Malignant Lesions
Man	uscrip	t number (if	f known):	QIMS-21-39	
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	followi uscript		ns apply to	o the author's relationshi	ips/activities/interests as they relate to the <u>current</u>
to th	ne epid	emiology o	f hypertei		defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive the manuscript.
				oort for the work reporte the past 36 months.	ed in this manuscript without time limit. For all other items,
				Name all entities with	Specifications/Comments
				whom you have this	(e.g., if payments were made to you or to your
				relationship or indicate	institution)
				none (add rows as	
				needed)	
	- 11			Time frame: Since the initi	ial 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.		inding,	None	
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2		or contracts tity (if not in		None	
	-	n #1 above).	alcuteu		
3	Royalt	ies or license	s	None	

4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations,	None	
	speakers bureaus,		
	manuscript writing or educational events		
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	None	
	Advisory Board		
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10	Leadership or fiduciary role in other board, society,	None	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment, materials, drugs, medical	None	
	writing, gifts or other		
	services		
13	Other financial or non- financial interests	None	

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