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)
		Time frame: Since the initia	l 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.	XNone	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or	X_None	
educational events		
Payment for expert testimony	XNone	
Support for attending meetings and/or travel	XNone	
Patents planned, issued or	XNone	
pending		
Participation on a Data	XNone	
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Receipt of equipment.	X None	
materials, drugs, medical		
writing, gifts or other		
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	lectures, presentations, speakers bureaus, manuscript writing or educational events  Payment for expert testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical	lectures, presentations, speakers bureaus, manuscript writing or educational events  Payment for expert testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or nonXNone

None.		

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

Date:Nov. 10 <sup>th</sup> , 2021
Your Name:Minghui Hua
Manuscript Title: Reproducibility of radiomic features of pulmonary nodules between low-dose CT and
conventional-dose CT
Manuscript number (if known): QIMS-21-609

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

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

Date:Nov. 10 <sup>th</sup> , 2021
Your Name:Jun Lv
Manuscript Title: Reproducibility of radiomic features of pulmonary nodules between low-dose CT and
conventional-dose CT
Manuscript number (if known): QIMS-21-609

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7	Support for attending meetings and/or travel	XNone	
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	Advisory Board		
10	Leadership or fiduciary role	XNone	
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12	Receipt of equipment,	X_None	
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Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or	X_None	
educational events		
Payment for expert testimony	XNone	
Support for attending meetings and/or travel	XNone	
Patents planned, issued or	XNone	
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Participation on a Data	XNone	
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Receipt of equipment.	X None	
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financial interests		
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None.		

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

Date:Nov. 10 <sup>th</sup> , 2021
Your Name:Yanzhen Liu
Manuscript Title: Reproducibility of radiomic features of pulmonary nodules between low-dose CT and
conventional-dose CT
Manuscript number (if known): QIMS-21-609

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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

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5	Payment or honoraria for	XNone	
	lectures, presentations,		
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6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or	XNone	
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	Advisory Board		
10	Leadership or fiduciary role	XNone	
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11	Stock or stock options	X None	
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12	Receipt of equipment,	X_None	
	materials, drugs, medical		
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13	Other financial or non-	XNone	
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12	Receipt of equipment,	X_None	
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	group, paid or unpaid		
11	Stock or stock options	X None	
	·		
12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
			•

None.			

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

Date:Nov. 10 <sup>th</sup> , 2021
Your Name:Ximing Li
Manuscript Title: Reproducibility of radiomic features of pulmonary nodules between low-dose CT and
conventional-dose CT
Manuscript number (if known): QIMS-21-609

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3	Royalties or licenses	XNone	
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	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
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7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
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11	Stock or stock options	X None	
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12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
			•

None.			

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

Date:Nov. 10 <sup>th</sup> , 2021
Your Name:Hong Zhang
Manuscript Title: Reproducibility of radiomic features of pulmonary nodules between low-dose CT and
conventional-dose CT
Manuscript number (if known): QIMS-21-609

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7	Support for attending meetings and/or travel	XNone	
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