Date:_2021.12.14
Your Name:Dan-Qiong Wang
Manuscript Title:Clinical and MRI Features About Two Types of Silent Cerebral Small-Vessel Disease in Type-2
Diabetes Mellitus: a retrospective cross-sectional study in a tertiary hospital
Manuscript number (if known):QIMS-21-786

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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		Time frame: Since the initial	planning of the work
1	All support for the present	_XNone	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	XNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	_XNone	
4	Consulting fees	_XNone	

	Payment or honoraria for lectures, presentations,	_XNone	
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert	X None	
	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	X None	
10	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	_XNone	
12	Dessint of any investor	N. News	
12	Receipt of equipment, materials, drugs, medical	_XNone	
	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:_2021.12.14			
Your Name:Lei Wang			
Manuscript Title:Clinical and MRI Features About Two Types of Silent Cerebral Small-Vessel Disease in Type-2			
Diabetes Mellitus: a retrospective cross-sectional study in a tertiary hospital			
Manuscript number (if known):QIMS-21-786			

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	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	XNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	_XNone	
4	Consulting fees	_XNone	

	Payment or honoraria for lectures, presentations,	_XNone	
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert	X None	
	testimony		
7	Support for attending meetings and/or travel	_XNone	
8	Patents planned, issued or	_XNone	
	pending		
9	Participation on a Data Safety Monitoring Board or	_XNone	
	Advisory Board		
10	Leadership or fiduciary role	X None	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	_XNone	
12	Receipt of equipment,	_XNone	
	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:_2021.12.14
Your Name:Xiao-Shuang Xia
Manuscript Title:Clinical and MRI Features About Two Types of Silent Cerebral Small-Vessel Disease in Type-2
Diabetes Mellitus: a retrospective cross-sectional study in a tertiary hospital
Manuscript number (if known):QIMS-21-786

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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)
1	All support for the present manuscript (e.g., funding,	Time frame: Since the initialXNone	
	provision of study materials, medical writing, article		
	processing charges, etc.) No time limit for this item.		
		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,	_XNone	
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert	X None	
	testimony		
7	Support for attending meetings and/or travel	_XNone	
8	Patents planned, issued or	_XNone	
	pending		
9	Participation on a Data Safety Monitoring Board or	_XNone	
	Advisory Board		
10	Leadership or fiduciary role	X None	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	_XNone	
12	Receipt of equipment,	_XNone	
	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:_2021.12.14
Your Name:Miao-Miao Wei
Manuscript Title:Clinical and MRI Features About Two Types of Silent Cerebral Small-Vessel Disease in Type-2
Diabetes Mellitus: a retrospective cross-sectional study in a tertiary hospital
Manuscript number (if known):QIMS-21-786

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

	Payment or honoraria for lectures, presentations,	_XNone	
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert	X None	
	testimony		
7	Support for attending meetings and/or travel	_XNone	
8	Patents planned, issued or	_XNone	
	pending		
9	Participation on a Data Safety Monitoring Board or	_XNone	
	Advisory Board		
10	Leadership or fiduciary role	X None	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	_XNone	
12	Receipt of equipment,	_XNone	
	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:_2021.12.14			
Your Name:Xiao-Lin Tian			
Manuscript Title:Clinical and MRI Features About Two Types of Silent Cerebral Small-Vessel Disease in Type-2			
Diabetes Mellitus: a retrospective cross-sectional study in a tertiary hospital			
Manuscript number (if known):QIMS-21-786			

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	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	XNone	
-	any entity (if not indicated in item #1 above).		
3	Royalties or licenses	_XNone	
4	Consulting fees	_XNone	

5	Payment or honoraria for	_XNone	
	lectures, presentations,		
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert	X None	
	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	X None	
10	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	X None	
	·		
12	12 Receipt of equipment, materials, drugs, medical writing, gifts or other services	_XNone	
13	Other financial or non-	XNone	
	financial interests		

None.

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

Date:_2021.12.14
Your Name:Liang-Fang Wang
Manuscript Title:Clinical and MRI Features About Two Types of Silent Cerebral Small-Vessel Disease in Type-2
Diabetes Mellitus: a retrospective cross-sectional study in a tertiary hospital
Manuscript number (if known):QIMS-21-786

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	No time limit for this item.		
		Time frame: past	36 months
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-	any entity (if not indicated in item #1 above).		
3	Royalties or licenses	_XNone	
4	Consulting fees	_XNone	

5	Payment or honoraria for	_XNone	
	lectures, presentations,		
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert	X None	
	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	X None	
10	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	X None	
	·		
12	12 Receipt of equipment, materials, drugs, medical writing, gifts or other services	_XNone	
13	Other financial or non-	XNone	
	financial interests		

None.

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

Date:_2021.12.14			
Your Name:Xin Li			
Manuscript Title:Clinical and MRI Features About Two Types of Silent Cerebral Small-Vessel Disease in Type-2			
Diabetes Mellitus: a retrospective cross-sectional study in a tertiary hospital			
Manuscript number (if known):QIMS-21-786			

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	No time limit for this item.			
	Time frame: past 36 months			
2	Grants or contracts from	XNone		
	any entity (if not indicated			
	in item #1 above).			
3	Royalties or licenses	_XNone		
4	Consulting fees	_XNone		

5	Payment or honoraria for	_XNone	
	lectures, presentations,		
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert	X None	
	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	X None	
10	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	X None	
	·		
12	12 Receipt of equipment, materials, drugs, medical writing, gifts or other services	_XNone	
13	Other financial or non-	XNone	
	financial interests		

None.

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