

ICMJE DISCLOSURE FORM

Date: May. 27th, 2022

Your Name: Xiaoyan Shen

Manuscript Title: Dilated Transformer: Residual Axial Attention for Breast Ultrasound Images

Segmentation Manuscript number (if known): QIMS-22-33-CL

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 initial planning of the work			
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Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<u>__X__</u> None	
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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> X <input type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> X <input type="checkbox"/> None	

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None.

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ICMJE DISCLOSURE FORM

Date: ____ May. 27th, 2022 ____

Your Name: __Liangyu Wang__

Manuscript Title: _Dilated Transformer: Residual Axial Attention for Breast Ultrasound Images Segmentation

Manuscript number (if known):_ QIMS-22-33-CL _

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Date: ____ May. 27th, 2022 ____

Your Name: ____ Yu Zhao ____

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Your Name: ____ Ruibo Liu ____

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