Da	te:2022.03.09			
Ma		e determination by dual-	source computed tomography in infants with pulmona	ry artery
Ma	anuscript number (if known)	):	TP-22-87	
rel pa to	ated to the content of your rties whose interests may b	manuscript. "Related" me e affected by the content necessarily indicate a bias	Ill relationships/activities/interests listed below that areans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment. If you are in doubt about whether to list a lo so.	
	e following questions apply anuscript only.	to the author's relationsh	nips/activities/interests as they relate to the <u>current</u>	
to me	the epidemiology of hypertoedication, even if that medic	ension, you should declar cation is not mentioned in poort for the work report	e <u>defined broadly</u> . For example, if your manuscript perfect all relationships with manufacturers of antihypertens the manuscript.  ed in this manuscript without time limit. For all other	sive
		T	To 10 11 10	1
		Name all entities with whom you have this	Specifications/Comments (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	XNone		
	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	XNone		
	any entity (if not indicated			
3	in item #1 above). Royalties or licenses	X None		-
2	hoyalties of licelises	XNone		

Consulting fees

\_X\_\_None

5	Payment or honoraria for lectures, presentations,	XNone	
	speakers bureaus, manuscript writing or educational events		
6	Payment for expert testimony	XNone	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy	XNone	
11	group, paid or unpaid Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	XNone	
13	Other financial or non- financial interests	XNone	
	ease summarize the above c	onflict of interest in the	following box:

Da	te:2022.03.09			
Yo	ur Name: Bing Wen			
			ource computed tomography in infants with pulmonary	artery
Ma	ng nnuscript number (if known)	) <b>:</b>	TP-22-87	
rel pa to	ated to the content of your rties whose interests may be	manuscript. "Related" me e affected by the content necessarily indicate a bias	Il relationships/activities/interests listed below that are cans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment . If you are in doubt about whether to list a o so.	
	e following questions apply inuscript only.	to the author's relationsh	ips/activities/interests as they relate to the <u>current</u>	
to me	the epidemiology of hyperto edication, even if that medic	ension, you should declare ation is not mentioned in pport for the work reporte	e defined broadly. For example, if your manuscript pertain all relationships with manufacturers of antihypertensive the manuscript.  The manuscript without time limit. For all other items	e
		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	
	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: pas	t 36 months	
	Grants or contracts from any entity (if not indicated in item #1 above).	XNone		

Royalties or licenses

Consulting fees

3

X\_\_None

\_X\_\_None

5	Payment or honoraria for lectures, presentations,	XNone	
	speakers bureaus, manuscript writing or educational events		
6	Payment for expert testimony	XNone	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy	XNone	
11	group, paid or unpaid Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	XNone	
13	Other financial or non- financial interests	XNone	
	ease summarize the above c	onflict of interest in the	following box:

Da	te:2022.03.09			
Yo	ur Name: Jianlin Li			
			source computed tomography in infants with pulmonar	y artery
sli	ng		 TP-22-87	
Ma	anuscript number (if known)	):	TP-22-87	
rel pa to rel Th	ated to the content of your rties whose interests may be transparency and does not ationship/activity/interest, e following questions apply	manuscript. "Related" me e affected by the content necessarily indicate a bias it is preferable that you d	Il relationships/activities/interests listed below that are eans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitmen s. If you are in doubt about whether to list a to so. hips/activities/interests as they relate to the current	
ma	anuscript only.			
to me	the epidemiology of hypertoedication, even if that medic	ension, you should declar cation is not mentioned in port for the work report	e defined broadly. For example, if your manuscript pert e all relationships with manufacturers of antihypertens the manuscript. ed in this manuscript without time limit. For all other in	ive
		Name all entities with	Specifications/Comments	
		whom you have this relationship or indicate none (add rows as needed)	(e.g., if payments were made to you or to your institution)	
		Time frame: Since the initi	al planning of the work	
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)	XNone		
	No time limit for this item.			
2	Cuanta an agustus sta fus sa	Time frame: pas	it 36 months	
2	Grants or contracts from any entity (if not indicated	XNone		
	in item #1 above).			
3	Royalties or licenses	XNone		

Consulting fees

\_X\_\_None

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone	
6	Payment for expert testimony	XNone	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	XNone	
13	Other financial or non- financial interests	XNone	
	ease summarize the above co	onflict of interest in the	following box:

Date:2022.03.09		
Your Name:Liangbo Hu		
Manuscript Title:_ Lung volume determination	by dual-source computed tomography in infants with pulmonary art	tery
sling		
Manuscript number (if known):	TP-22-87	

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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

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 whom you have this relationship or indicate none (add rows as needed)  Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution)
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.	The Natural Science Fund of Yongchuan District, Chongqing. (grant numbers: Ycstc, 2015nc5010).	The Yongchuan Hospital of Chongqing Medical University, Chongqing, China
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	36 months
3	any entity (if not indicated	None	

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

### Please summarize the above conflict of interest in the following box:

The author reports that the funding from the Natural Science Fund of Yongchuan District, Chongqing. (gra	ant
numbers: Ycstc, 2015nc5010).	

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

Date:2022.03.09					
our Name: Jian Liu					
Manuscript Title:_ Lung volume determination by di sling	ual-source computed tomography in infants with pulmonal	ry artery			
Manuscript number (if known):					
related to the content of your manuscript. "Related	se all relationships/activities/interests listed below that ar "means any relation with for-profit or not-for-profit third				
parties whose interests may be affected by the cont to transparency and does not necessarily indicate a relationship/activity/interest, it is preferable that yo	•	ιτ			

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

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 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
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	

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

ICMJE DISCLOSURE FORM									
Dat	Date:2022.03.09								
You	ır Name: Hao Yang								
			ource computed tomography in infants with pulmonary	artery					
Mai	slingTP-22-87TP-22-87								
rela part to t	ited to the content of your ties whose interests may b ransparency and does not	manuscript. "Related" mea e affected by the content o	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 If you are in doubt about whether to list a so.						
The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u> .									
to t	he epidemiology of hypert	-	defined broadly. For example, if your manuscript pertai all relationships with manufacturers of antihypertensiv the manuscript.						
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)						
		none (add rows as							
		needed)							
		Time frame: Since the initial	planning of the work						
1	All support for the present	XNone							

		whom you have this relationship or indicate none (add rows as needed)	(e.g., if payments were made to you or to your institution)
		Time frame: Since the initial	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).	X_None	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

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