Date:	2023/12/06	
Your Name:	Jiabin Zheng	
Manuscript Title:	Development and validation of a computed tomography-based radiomics signa	ture to predict
"highest-risk" from	patients with high-risk gastrointestinal stromal tumor	
Manuscript numbe	er (if known):	
	ransparency, we ask you to disclose all relationships/activities/interests listed belo	

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		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)
			plaining 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.		
	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		
6	educational events Payment for expert	X None	
0	testimony	xNone	
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	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:	2023/12/06
Your Name:	Qianchao Liao
Manuscript Title:	Development and validation of a computed tomography-based radiomics signature to predict
"highest-risk" from	patients with high-risk gastrointestinal stromal tumor
Manuscript number	r (if known):
In the interest of tra	ansparency, we ask you to disclose all relationships/activities/interests listed below that are
related to the cente	ant of your manuscript "Polated" moans any relation with for profit or not for profit third

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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	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	XNone	
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	X None	
	financial interests		

None	

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

Date:	2023/12/06	
	Xiaobo Chen	
Manuscript Title	e: Development and va	alidation of a computed tomography-based radiomics signature to predict
"highest-risk" fr	om patients with high-risk	gastrointestinal stromal tumor
Manuscript num	nber (if known):	
	• • •	to disclose all relationships/activities/interests listed below that are "Related" means any relation with for-profit or not-for-profit third

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		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)
			plaining 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.		
	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	
U	testimony	XNone	
	•		
7	Support for attending meetings and/or travel	XNone	
	Ç ,		
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	
	Stock of Stock options		
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	X None	
	financial interests		
		<u> </u>	

None			

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

Date:	_2023/12/06	
Your Name:	Minping Hong	
Manuscript Title:	_ Development and validation of a computed tomography-based radiomics signature	to predict
"highest-risk" from	patients with high-risk gastrointestinal stromal tumor	
Manuscript number	(if known):	
In the interest of tra	nsparency, we ask you to disclose all relationships/activities/interests listed below th	at are
related to the conte	nt of your manuscript. "Related" means any relation with for-profit or not-for-profit t	hird
parties whose inter	sts may be affected by the content of the manuscript. Disclosure represents a commi	tment
to transparency and	does not necessarily indicate a bias. If you are in doubt about whether to list a	

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

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1	All support for the present	XNone	
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	No time limit for this item.		
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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	V. Nana	
6	Payment for expert testimony	XNone	
	testimony		
7	Support for attending	X None	
,	meetings and/or travel		
	meetings and, or traver		
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	
11	Stock of Stock options		
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:	_2023/11/30	
Your Name:	Alessandro Mazzocca	
Manuscript Title:	Development and validation of a computed tomography-based radiomics signature to pred	ict
"highest-risk" from	patients with high-risk gastrointestinal stromal tumor	
Manuscript numbe	(if known):	
related to the conto parties whose inter	insparency, we ask you to disclose all relationships/activities/interests listed below that are not of your manuscript. "Related" means any relation with for-profit or not-for-profit third lests may be affected by the content of the manuscript. Disclosure represents a commitment	
•	does not necessarily indicate a bias. If you are in doubt about whether to list a //interest, it is preferable that you do so.	

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		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	
0	testimony	XNone	
	•		
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or	XNone	
	pending		
•	5	V N	
9	Participation on a Data Safety Monitoring Board or	XNone	
	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		V. N	
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:

Dat	e:20/11/2023		
You	r Name:_Milena Urbini		
Mai	nuscript Title: Developn	nent and validation of a	a computed tomography-based radiomics signature to
pre	dict "highest-risk" from	patients with high-risl	k gastrointestinal stromal tumor
_	nuscript number (if known)		
rela part to t rela The mai	ted to the content of your ties whose interests may be ransparency and does not tionship/activity/interest, following questions apply nuscript only. author's relationships/act he epidemiology of hypertodication, even if that medication.	manuscript. "Related" mee affected by the content necessarily indicate a bias it is preferable that you do to the author's relationshivities/interests should be ension, you should declare that is not mentioned in poort for the work reported.	nips/activities/interests as they relate to the <u>current</u> e <u>defined broadly</u> . For example, if your manuscript pertains e all relationships with manufacturers of antihypertensive
		Name all entities with whom you have this relationship or indicate none (add rows as	Specifications/Comments (e.g., if payments were made to you or to your institution)
		needed)	
		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.	None	
		Time frame: pas	st 36 months
	Grants or contracts from any entity (if not indicated in item #1 above).	None	
}	Royalties or licenses	None	
	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	
	in other board, society,		
	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		
Ple	Please summarize the above conflict of interest in the following box:		
Г	A.		
	None.		

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

Date:	2023/12/06	
Your Name:	Zaiyi Liu	
Manuscript Title:	Development a	and validation of a computed tomography-based radiomics signature to predict
'highest-risk" from	patients with high	n-risk gastrointestinal stromal tumor
Manuscript number	(if known):	
n the interest of tra	ncnaroncy we as	k you to disclose all relationships/activities/interests listed below that are

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	any entity (if not indicated		
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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	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	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:	_2023/12/06
Your Name:	Yong Li
Manuscript Title:	_ Development and validation of a computed tomography-based radiomics signature to predict
"highest-risk" from p	patients with high-risk gastrointestinal stromal tumor
Manuscript number	(if known):
·	

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	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	X None	
0	testimony	XNone	
	·		
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or	XNone	
	pending		
•	5	V N	
9	Participation on a Data Safety Monitoring Board or	XNone	
	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		V. N	
12	Receipt of equipment, materials, drugs, medical	XNone	
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

None	

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