Date:2021-6-25
Your Name:Guo Huang
Manuscript Title: A systematic review and meta-analysis of diagnostic performance and physicians' perceptions of
AI-assisted CT diagnostic technology for classification of pulmonary nodules
Manuscript number (if known): JTD-21-810

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.

		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.	National Center for Medical Service Administration, Beijing, P.R. China	This work was supported by the National Center for Medical Service Administration, Beijing, P.R. China.
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	√None	
3	Royalties or licenses	√None	

4 Consulting fees None 5 Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or ducational events None 6 Payment for expert testimony None				
letures, presentations, speakers bureaus, manuscript writing or educational events	4	Consulting fees	_√None	
letures, presentations, speakers bureaus, manuscript writing or educational events				
letures, presentations, speakers bureaus, manuscript writing or educational events				
speakers bureaus, manuscript writing or educational events None 6 Payment for expert testimony None 7 Support for attending meetings and/or travel None 8 Patents planned, issued or pending None 9 Patricipation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None	5	-	√None	
manuscript writing or educational events None 6 Payment for expert testimony None 7 Support for attending meetings and/or travel None 8 Patents planned, issued or pending None 9 Participation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None				
educational events				
6 Payment for expert testimony None 7 Support for attending meetings and/or travel None 7 Patents planned, issued or pending None 8 Patents planned, issued or pending None 9 Participation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None				
testimony	6		/ Nono	
7 Support for attending meetings and/or travel None 7 Support for attending meetings and/or travel None 8 Patents planned, issued or pending None 9 Patticipation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None	0			
meetings and/or travel Image: Contract of the services 8 Patents planned, issued or pending None 9 Participation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None		cestimony		
meetings and/or travel Image: Comparison of travel 8 Patents planned, issued or pending None 9 Participation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None	7	Support for attending	√ None	
8 Patents planned, issued or pending None 9 Participation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None				
pending		C .		
pending				
pending				
9 Participation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None	8		_√None	
Safety Monitoring Board or Advisory Board		pending		
Safety Monitoring Board or Advisory Board				
Advisory Board	9		√None	
10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None				
in other board, society, committee or advocacy group, paid or unpaid	10			
committee or advocacy	10		√None	
group, paid or unpaid		-		
11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None				
materials, drugs, medical	11		√None	
materials, drugs, medical				
materials, drugs, medical				
writing, gifts or other services	12		√None	
services 13 Other financial or non- None				
13 Other financial or nonNone				
	13		√ None	

Guo Huang reports grants from the National Center for Medical Service Administration, Beijing, P.R. China, during the conduct of the study.

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

Date:2021-6-25			
Your Name:Xuefeng Wei			
Manuscript Title: A systematic review and meta-analysis of diagnostic performance and physicians' perceptions of			
AI-assisted CT diagnostic technology for classification of pulmonary nodules			
Manuscript number (if known): JTD-21-810			

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.

		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.	National Center for Medical Service Administration, Beijing, P.R. China	This work was supported by the National Center for Medical Service Administration, Beijing, P.R. China.
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	√None	
3	Royalties or licenses	√None	

4 Consulting fees None 5 Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or ducational events None 6 Payment for expert testimony None				
letures, presentations, speakers bureaus, manuscript writing or educational events	4	Consulting fees	_√None	
letures, presentations, speakers bureaus, manuscript writing or educational events				
letures, presentations, speakers bureaus, manuscript writing or educational events				
speakers bureaus, manuscript writing or educational events None 6 Payment for expert testimony None 7 Support for attending meetings and/or travel None 8 Patents planned, issued or pending None 9 Patricipation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None	5	-	√None	
manuscript writing or educational events None 6 Payment for expert testimony None 7 Support for attending meetings and/or travel None 8 Patents planned, issued or pending None 9 Participation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None				
educational events				
6 Payment for expert testimony None 7 Support for attending meetings and/or travel None 7 Patents planned, issued or pending None 8 Patents planned, issued or pending None 9 Participation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None				
testimony	6		/ Nono	
7 Support for attending meetings and/or travel None 7 Support for attending meetings and/or travel None 8 Patents planned, issued or pending None 9 Patticipation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None	0			
meetings and/or travel Image: Contract of the services 8 Patents planned, issued or pending None 9 Participation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None		cestimony		
meetings and/or travel Image: Comparison of travel 8 Patents planned, issued or pending None 9 Participation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None	7	Support for attending	√ None	
8 Patents planned, issued or pending None 9 Participation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None				
pending		C .		
pending				
pending				
9 Participation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None	8		_√None	
Safety Monitoring Board or Advisory Board		pending		
Safety Monitoring Board or Advisory Board				
Advisory Board	9		√None	
10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None				
in other board, society, committee or advocacy group, paid or unpaid	10			
committee or advocacy	10		√None	
group, paid or unpaid		-		
11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None				
materials, drugs, medical	11		√None	
materials, drugs, medical				
materials, drugs, medical				
writing, gifts or other services	12		√None	
services 13 Other financial or non- None				
13 Other financial or nonNone				
	13		√ None	

Xuefeng Wei reports grants from the National Center for Medical Service Administration, Beijing, P.R. China, during the conduct of the study.

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

Date:2021-6-25				
Your Name:Huiqin Tang				
Manuscript Title: A systematic review and meta-analysis of diagnostic performance and physicians' perceptions of				
AI-assisted CT diagnostic technology for classification of pulmonary nodules				
Manuscript number (if known): JTD-21-810				

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.

		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.	National Center for Medical Service Administration, Beijing, P.R. China	This work was supported by the National Center for Medical Service Administration, Beijing, P.R. China.
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	√None	
3	Royalties or licenses	√None	

4 Consulting fees None 5 Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or ducational events None 6 Payment for expert testimony None				
letures, presentations, speakers bureaus, manuscript writing or educational events	4	Consulting fees	_√None	
letures, presentations, speakers bureaus, manuscript writing or educational events				
letures, presentations, speakers bureaus, manuscript writing or educational events				
speakers bureaus, manuscript writing or educational events None 6 Payment for expert testimony None 7 Support for attending meetings and/or travel None 8 Patents planned, issued or pending None 9 Patricipation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None	5	-	√None	
manuscript writing or educational events None 6 Payment for expert testimony None 7 Support for attending meetings and/or travel None 8 Patents planned, issued or pending None 9 Participation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None				
educational events				
6 Payment for expert testimony None 7 Support for attending meetings and/or travel None 7 Patents planned, issued or pending None 8 Patents planned, issued or pending None 9 Participation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None				
testimony	6		/ Nono	
7 Support for attending meetings and/or travel None 7 Support for attending meetings and/or travel None 8 Patents planned, issued or pending None 9 Patticipation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None	0			
meetings and/or travel Image: Contract of the services 8 Patents planned, issued or pending None 9 Participation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None		cestimony		
meetings and/or travel Image: Comparison of travel 8 Patents planned, issued or pending None 9 Participation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None	7	Support for attending	√ None	
8 Patents planned, issued or pending None 9 Participation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None				
pending		C .		
pending				
pending				
9 Participation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None	8		_√None	
Safety Monitoring Board or Advisory Board		pending		
Safety Monitoring Board or Advisory Board				
Advisory Board	9		√None	
10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None				
in other board, society, committee or advocacy group, paid or unpaid	10			
committee or advocacy	10		√None	
group, paid or unpaid		-		
11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None				
materials, drugs, medical	11		√None	
materials, drugs, medical				
materials, drugs, medical				
writing, gifts or other services	12		√None	
services 13 Other financial or non- None				
13 Other financial or nonNone				
	13		√ None	

Huiqin Tang reports grants from the National Center for Medical Service Administration, Beijing, P.R. China, during the conduct of the study.

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

Date:2021-6-25
Your Name:Fei Bai
Manuscript Title: A systematic review and meta-analysis of diagnostic performance and physicians' perceptions of
AI-assisted CT diagnostic technology for classification of pulmonary nodules
Manuscript number (if known): JTD-21-810

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.

		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.	National Center for Medical Service Administration, Beijing, P.R. China	This work was supported by the National Center for Medical Service Administration, Beijing, P.R. China.
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	√None	
3	Royalties or licenses	√None	

4 Consulting fees None 5 Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or ducational events None 6 Payment for expert testimony None				
letures, presentations, speakers bureaus, manuscript writing or educational events	4	Consulting fees	_√None	
letures, presentations, speakers bureaus, manuscript writing or educational events				
letures, presentations, speakers bureaus, manuscript writing or educational events				
speakers bureaus, manuscript writing or educational events None 6 Payment for expert testimony None 7 Support for attending meetings and/or travel None 8 Patents planned, issued or pending None 9 Patricipation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None	5	-	√None	
manuscript writing or educational events None 6 Payment for expert testimony None 7 Support for attending meetings and/or travel None 8 Patents planned, issued or pending None 9 Participation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None				
educational events				
6 Payment for expert testimony None 7 Support for attending meetings and/or travel None 7 Patents planned, issued or pending None 8 Patents planned, issued or pending None 9 Participation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None				
testimony	6		/ Nono	
7 Support for attending meetings and/or travel None 7 Support for attending meetings and/or travel None 8 Patents planned, issued or pending None 9 Patticipation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None	0			
meetings and/or travel Image: Constraint of the services 8 Patents planned, issued or pending None 9 Participation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None		cestimony		
meetings and/or travel Image: Comparison of travel 8 Patents planned, issued or pending None 9 Participation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None	7	Support for attending	√ None	
8 Patents planned, issued or pending None 9 Participation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None				
pending		C .		
pending				
pending				
9 Participation on a Data Safety Monitoring Board or Advisory Board None 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None	8		_√None	
Safety Monitoring Board or Advisory Board		pending		
Safety Monitoring Board or Advisory Board				
Advisory Board	9		√None	
10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid None 11 Stock or stock options None 11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None				
in other board, society, committee or advocacy group, paid or unpaid	10			
committee or advocacy	10		√None	
group, paid or unpaid		-		
11 Stock or stock options None 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services None 13 Other financial or non- None				
materials, drugs, medical	11		√None	
materials, drugs, medical				
materials, drugs, medical				
writing, gifts or other services	12		√None	
services 13 Other financial or non- None				
13 Other financial or nonNone				
	13		√ None	

Fei Bai reports grants from the National Center for Medical Service Administration, Beijing, P.R. China, during the conduct of the study.

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

Date:2021-6-25			
Your Name:Xia Lin			
Manuscript Title: A systematic review and meta-analysis of diagnostic performance and physicians' perceptions of			
AI-assisted CT diagnostic technology for classification of pulmonary nodules			
Manuscript number (if known): JTD-21-810			

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.

		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.	National Center for Medical Service Administration, Beijing, P.R. China	This work was supported by the National Center for Medical Service Administration, Beijing, P.R. China.
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	√None	
3	Royalties or licenses	√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	
0	testimony		
7	Support for attending	√ None	
	meetings and/or travel		
	C .		
8	Patents planned, issued or	_√None	
	pending		
9	Participation on a Data	√None	
	Safety Monitoring Board or Advisory Board		
10			
10	Leadership or fiduciary role 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		

Xia Lin reports grants from the National Center for Medical Service Administration, Beijing, P.R. China, during the conduct of the study.

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

Date:2021-6-25
Your Name:Di Xue
Manuscript Title: A systematic review and meta-analysis of diagnostic performance and physicians' perceptions of
AI-assisted CT diagnostic technology for classification of pulmonary nodules
Manuscript number (if known): JTD-21-810

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.

		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.	National Center for Medical Service Administration, Beijing, P.R. China	This work was supported by the National Center for Medical Service Administration, Beijing, P.R. China.
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	√None	
3	Royalties or licenses	√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	
0	testimony		
7	Support for attending	√ None	
	meetings and/or travel		
	<u> </u>		
8	Patents planned, issued or	_√None	
	pending		
9	Participation on a Data	√None	
	Safety Monitoring Board or Advisory Board		
10			
10	Leadership or fiduciary role 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		

Di Xue reports grants from the National Center for Medical Service Administration, Beijing, P.R. China, during the conduct of the study.

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