

## ICMJE DISCLOSURE FORM

Date: July 20, 2022

Your Name: Yuen Teng

Manuscript Title: The feasibility of MRI texture analysis in distinguishing glioblastoma, anaplastic astrocytoma and anaplastic oligodendroglioma

Manuscript number (if known): TCR-22-1390

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 current manuscript only.

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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)
<b>Time frame: Since the initial planning of the work</b>			
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) <b>No time limit for this item.</b>	1-3-5 project for disciplines of excellence—Clinical Research Incubation Project, West China Hospital, Sichuan University	None
<b>Time frame: past 36 months</b>			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<u>None</u>	

3	Royalties or licenses	___ None	
4	Consulting fees	___ None	
5	Payment or honoraria for lectures, presentations, 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	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-financial interests	___ None	

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

This study has received funding by 1·3·5 project for disciplines of excellence—Clinical Research Incubation Project, West China Hospital, Sichuan University (2020HXFH036).

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

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

## ICMJE DISCLOSURE FORM

Date: July 20, 2022

Your Name: Chaoyue Chen

Manuscript Title: The feasibility of MRI texture analysis in distinguishing glioblastoma, anaplastic astrocytoma and anaplastic oligodendroglioma

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## ICMJE DISCLOSURE FORM

Date: July 20, 2022

Your Name: Yang Zhang

Manuscript Title: The feasibility of MRI texture analysis in distinguishing glioblastoma, anaplastic astrocytoma and anaplastic oligodendroglioma

Manuscript number (if known): TCR-22-1390

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## ICMJE DISCLOSURE FORM

Date: July 20, 2022  
 Your Name: Jianguo Xu  
 Manuscript Title: The feasibility of MRI texture analysis in distinguishing glioblastoma, anaplastic astrocytoma and anaplastic oligodendroglioma  
 Manuscript number (if known): TCR-22-1390

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