ICMJE DISCLOSURE FORM

15 2.00-200 II - 0
Date: 2022/11/26
Your Name:Yiren Wang
Manuscript Title: Construction of a diagnostic prediction model for nasopharyngeal carcinoma gene signatures based on random
forest and artificial neural network
Manuscript number (if known):
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> manuscript only.

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	
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2	Constant and a section of the section	Time frame: past	36 Months
2	Grants or contracts from any entity (if not indicated	XNone	
	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 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	X None	
	in other board, society, committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	V Name	
12	materials, drugs, medical	X None	
	writing, gifts or other		
13	services Other financial or non-	V Name	
13	financial interests	XNone	
	manetal interests		
Ple	ease summarize the above co	onflict of interest in the fo	llowing box:
	None		

		ICMJE DISC	LOSURE FORM
Date	e:2022/11/26		
You	r Name:Yongcheng He		
Mar	nuscript Title: Construction	of a diagnostic prediction mo	del for nasopharyngeal carcinoma gene signatures based on randon
	forest and artificial neura	l network	
Mar	nuscript number (if known	:	
rela part to t	ted to the content of your ties whose interests may b	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.
	following questions apply nuscript only.	to the author's relationsh	ips/activities/interests as they relate to the <u>current</u>
to t	•	ension, you should declare	defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive the manuscript.
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		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 initia	al planning of the work
	All support for the present	X None	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		

Time frame: past 36 months

X__None

X__None

_**X**__None

X__None

No time limit for this item.

Grants or contracts from

Royalties or licenses

Consulting fees

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any entity (if not indicated in item #1 above).

Payment or honoraria for

	lectures, presentations, 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	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	X None	
	in other board, society, committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	V Name	
12	materials, drugs, medical	X None	
	writing, gifts or other		
13	services Other financial or non-	V Name	
13	financial interests	XNone	
	manetal interests		
Ple	ease summarize the above co	onflict of interest in the fo	llowing box:
	None		

ICMJE DISCLOSURE FORM

Date:2022/11/26	
Your Name:Xiaodong Duan	
Manuscript Title: Construction of a diagnostic prediction model for nasopharyngeal carcinoma gene signatu	ures based on random
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Manuscript number (if known):	
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		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	

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

	ICMJE DISCLOSURE FORM				
Dat	Date: 2022/11/26				
Υοι	ır Name:Haowen Pang_				
Ma	nuscript Title: Construction o	of a diagnostic prediction mo	del for nasopharyngeal carcinoma gene signatures based on randon		
	forest and artificial neura	l network			
Ma	nuscript number (if known)):	-		
rela par to t	ated to the content of your ties whose interests may be	manuscript. "Related" me e affected by the content necessarily indicate a bias	I 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 of If you are in doubt about whether to list a poso.		
	e following questions apply nuscript only.	to the author's relationsh	ips/activities/interests as they relate to the <u>current</u>		
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		needed)			
		Time frame: Since the initia	l planning of the work		
	All support for the present	XNone	_		
	manuscript (e.g., funding,				
	provision of study materials, medical writing, article				

Time frame: past 36 months

X__None

X__None

_**X**__None

X__None

processing charges, etc.)

No time limit for this item.

Grants or contracts from

in item #1 above).
Royalties or licenses

Consulting fees

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any entity (if not indicated

Payment or honoraria for

	lectures, presentations, 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	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
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12	materials, drugs, medical	X None	
	writing, gifts or other		
13	services Other financial or non-	V Name	
13	financial interests	XNone	
	manetal interests		
Ple	ease summarize the above co	onflict of interest in the fo	llowing box:
	None		

	ICMJE DISCLOSURE FORM			
Da	te:2022/11/26			
Yo	ur Name:Ping Zhou			
Ma	nuscript Title: Construction c	of a diagnostic prediction mod	del for nasopharyngeal carcinoma gene signatures based on	random
	forest and artificial neura	<u>l network</u>		
Ma	nuscript number (if known)	:		
rel par to	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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		relationship or indicate	institution)	
		none (add rows as		
		needed) Time frame: Since the initial	planning of the work	
1	All support for the research		planning of the work	
T	All support for the present manuscript (e.g., funding,	XNone		
	provision of study materials,			
	medical writing, article			

		none (add rows as needed)	
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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 testimony	XNone	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or	XNone	
	pending		
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9	Participation on a Data Safety Monitoring Board or	XNone	
	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,	X None	
12	materials, drugs, medical	X None	
	writing, gifts or other services		
13	Other financial or non-	XNone	
	financial interests		
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