ICMJE DISCLOSURE FORM

Date: ___8/11/2023_____

Your Name: _____Darnell K Adrian Williams Jr._____

Manuscript Title: _____Digital Pathology, Deep Learning, and Cancer-Getting Down to Business_____

Manuscript number (if known): __TCR-23-964_____

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 manuscript only</u>.

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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.**	__X__None	
		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	__X__None	
4	Consulting fees	__X__None	

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

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

None.

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

__X_ 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: ____**August 21ᵗʰ, 2023**____

Your Name: _____**Gillian Graifman**_____

Manuscript Title: _____**Digital Pathology, Deep Learning, and Cancer**_____

Manuscript number (if known): __**TCR-23-964**____

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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11	Stock or stock options	__X__None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	__X_None	
13	Other financial or non-financial interests	__X__None	

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

None.

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

__X_ 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: ____August 26th, 2023_____

Your Name: _____Nowair Hussain_____

Manuscript Title: _____Digital Pathology, Deep Learning, and Cancer-Getting Down to Business_____

Manuscript number (if known): __TCR-23-964_____

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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3	Royalties or licenses	__X__None	
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11	Stock or stock options	__X__None	
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13	Other financial or non-financial interests	__X__None	

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

None.

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

__X_ 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: ___Aug. 23, 2023___

Your Name: _____Maytal Amiel_____

Manuscript Title: _____Digital Pathology, Deep Learning, and Cancer-Getting Down to Business_____

Manuscript number (if known): _____TCR-23-964_____

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11	Stock or stock options	__X__None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	__X_None	
13	Other financial or non-financial interests	__X__None	

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None.

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

__X_ 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: _____**August 21ᵗʰ, 2023**_____

Your Name: _____**Tran Priscilla**_____

Manuscript Title: _____**Digital Pathology, Deep Learning, and Cancer-Getting Down to Business**_____

Manuscript number (if known): __**TCR-23-964**_____

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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10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	__X__None	
11	Stock or stock options	__X__None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	__X_None	
13	Other financial or non-financial interests	__X__None	

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

None.

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

__X_ 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: **August 23, 2023**

Your Name: **Arjun Reddy**

Manuscript Title: **Digital Pathology, Deep Learning, and Cancer-Getting Down to Business**

Manuscript number (if known): **TCR-23-964**

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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11	Stock or stock options	__X__None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	__X_None	
13	Other financial or non-financial interests	__X__None	

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

None.

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

__X_ **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: _____**August 30, 2023**_____

Your Name: __**Ali Haider**_____

Manuscript Title: _____**Digital Pathology, Deep Learning, and Cancer-Getting Down to Business**_____

Manuscript number (if known): __**TCR-23-964**_____

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10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	__X__None	
11	Stock or stock options	__X__None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	__X_None	
13	Other financial or non-financial interests	__X__None	

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

None.

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

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ICMJE DISCLOSURE FORM

Date: Aug 16, 2023
Your Name: Bali Kavitesh Kumar
Manuscript Title: Digital Pathology, Deep Learning, and Cancer-Getting Down to Business
Manuscript number (if known):

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

> None

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

__X_ 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: Aug. 23, 2023

Your Name: Austin Li

Manuscript Title: Digital Pathology, Deep Learning, and Cancer-Getting Down to Business

Manuscript number (if known): TCR-23-964

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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13	Other financial or non-financial interests	__X__None	

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

None.

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

__X_ 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: ___August 29, 2023___

Your Name: _ Leael Alishahian___

Manuscript Title: ___Digital Pathology, Deep Learning, and Cancer___

Manuscript number (if known): __TCR-23-964___

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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ICMJE DISCLOSURE FORM

Date: **Aug 13, 2023**

Your Name: **Nichelle Perera**

Manuscript Title: **Digital Pathology, Deep Learning, and Cancer-Getting Down to Business**

Manuscript number (if known):   **TCR-23-964**

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ICMJE DISCLOSURE FORM

Date: _____**August 11ᵗʰ, 2023**_____

Your Name: _____**Corey Maxwell Efros**_____

Manuscript Title: _**Digital Pathology, Deep Learning, and Cancer-Getting Down to Business**_____

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.

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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)
	**Time frame: Since the initial planning of the work**		
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colspan="4"	**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	__X__None	
4	Consulting fees	__X__None	

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

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

None.

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

__X_ 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: <u>08/11/2023</u>
Your Name: <u>Myoungmee Babu</u>
Manuscript Title: Digital Pathology, Deep Learning, and Cancer-Getting Down to Business
Manuscript number (if known): TCR-23-964

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3	Royalties or licenses	_x___None	
4	Consulting fees	__x__None	
5	Payment or honoraria for	__x__None	

	lectures, presentations, speakers bureaus, manuscript writing or educational events		
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13	Other financial or non-financial interests	__x__None	

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

None

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

__x_ 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: **August 29, 2023**

Your Name: **Mathew Tharakan**

Manuscript Title: **Digital Pathology, Deep Learning, and Cancer-Getting Down to Business**

Manuscript number (if known): **TCR-23-964**

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

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

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ICMJE DISCLOSURE FORM

Date: _____**August 30, 2023**_____

Your Name: _____**Mill Etienne**_____

Manuscript Title: _____**Digital Pathology, Deep Learning, and Cancer-Getting Down to Business**_____

Manuscript number (if known): __**TCR-23-964**_____

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ICMJE DISCLOSURE FORM

Date: _____**August 30th, 2023**_____

Your Name: _____**Benson Babu MD**_____

Manuscript Title: _____**Digital Pathology, Deep Learning, and Cancer-Getting Down to Business**_____

Manuscript number (if known): __**TCR-23-964**_____

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