Date: 12-5-21

Your Name: Jiajun Deng

Manuscript Title: Implementation of artificial intelligence in the histological assessment of pulmonary subsolid

nodules

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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		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	

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Date:	12-5-21

Your Name: Mengmeng Zhao

Manuscript Title: Implementation of artificial intelligence in the histological assessment of pulmonary subsolid

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	1	None.			

Date:	12-5-21
Date.	TZ-2-ZT

Your Name: Qiuyuan Li

Manuscript Title: Implementation of artificial intelligence in the histological assessment of pulmonary subsolid

nodules

Manuscript number (if known):______

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	lectures, presentations,				
	speakers bureaus,				
	manuscript writing or educational events				
6	Payment for expert	X None			
	testimony				
7	Support for attending meetings and/or travel	X None			
8	Patents planned, issued or	X None			
	pending				
9	Participation on a Data	X None			
	Safety Monitoring Board or				
10	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	X None			
12	Receipt of equipment,	X None			
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	writing, gifts or other				
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13	Other financial or non-	X None			
	financial interests				
Plea	Please summarize the above conflict of interest in the following box:				
N	None.				
Plea	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.

Date:	12-5-21
Dutt.	

Your Name: Yikai Zhang

Manuscript Title: Implementation of artificial intelligence in the histological assessment of pulmonary subsolid

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Date:	12-5-21

Your Name: Minjie Ma

Manuscript Title: Implementation of artificial intelligence in the histological assessment of pulmonary subsolid

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'	None.				

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10	in other board, society,	X None			
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	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				
	·				
Plea	Please summarize the above conflict of interest in the following box:				
Γ.	News				
'	None.				

Date: 1	L2-5-21
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Your Name: Jun Wang

Manuscript Title: Implementation of artificial intelligence in the histological assessment of pulmonary subsolid

nodules

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
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	X None					
	lectures, presentations,						
	speakers bureaus,						
	manuscript writing or educational events						
6	Payment for expert	X None					
	testimony						
7	Support for attending meetings and/or travel	X None					
8	Patents planned, issued or	X None					
	pending						
9	Participation on a Data	X None					
	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	X None					
	ор и от	XNone					
12	Receipt of equipment,	X None					
-	materials, drugs, medical						
	writing, gifts or other						
	services						
13	Other financial or non-	X None					
	financial interests						
Plea	Please summarize the above conflict of interest in the following box:						
N	None.						
Plea	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.

Date: 12-5-21

Your Name: Yunlang She

Manuscript Title: Implementation of artificial intelligence in the histological assessment of pulmonary subsolid

nodules

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4	Consulting fees	X None	

5	Payment or honoraria for	X None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	X None	
	testimony		
7	Support for attending meetings and/or travel	X None	
8	Patents planned, issued or	X None	
	pending		
9	Participation on a Data	X None	
	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	X None	
	ор и от	XNone	
12	Receipt of equipment,	X None	
-	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	X None	
	financial interests		
Plea	se summarize the above co	nflict of interest in the fol	lowing box:
N	one.		
Plea	ase place an "X" next to the	following statement to in	dicate 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.

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Your Name: Yan Jiang

Manuscript Title: Implementation of artificial intelligence in the histological assessment of pulmonary subsolid

nodules

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	No time limit for this item.		
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	any entity (if not indicated		
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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		
6	Payment for expert	X None	
	testimony		
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7	Support for attending meetings and/or travel	X None	
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	X None	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	X None	
11	Stock of Stock options	^ None	
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non- financial interests	XNone	
Plea	Please summarize the above conflict of interest in the following box:		
N	one.		

Date: 12-5-21

Your Name: Yunzeng Zhang

Manuscript Title: Implementation of artificial intelligence in the histological assessment of pulmonary subsolid

nodules

Manuscript number (if known):

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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

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5	Payment or honoraria for	X None		
	lectures, presentations,			
	speakers bureaus,			
	manuscript writing or educational events			
6	Payment for expert	X None		
Ü	testimony	XNone		
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7	Support for attending	X None		
	meetings and/or travel			
8	Patents planned, issued or	X None		
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9	Participation on a Data	X None		
	Safety Monitoring Board or Advisory Board			
10	Leadership or fiduciary role	V. Nene		
10	in other board, society,	X None		
	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			
Plea	Please summarize the above conflict of interest in the following box:			
Γ.				
'	None.			

Date:	12-5-21

Your Name: Tingting Wang

Manuscript Title: Implementation of artificial intelligence in the histological assessment of pulmonary subsolid

nodules

Manuscript number (if known):

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	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	X None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	X None	
4	Consulting fees	X None	

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Advisory Board 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid 11 Stock or stock options 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services 13 Other financial or non-financial interests Please summarize the above conflict of interest in the following box:	9		X None			
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None.	PIE	Please summarize the above conflict of interest in the following box:				
	1	None.				

Date:	12-5-21

Your Name: Chunyan Wu

Manuscript Title: Implementation of artificial intelligence in the histological assessment of pulmonary subsolid

nodules

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	

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5	Payment or honoraria for	X None			
	lectures, presentations,				
	speakers bureaus,				
	manuscript writing or educational events				
6	Payment for expert	X None			
Ü	testimony	XNone			
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7	Support for attending	X None			
	meetings and/or travel				
8	Patents planned, issued or	X None			
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9	Participation on a Data	X None			
	Safety Monitoring Board or Advisory Board				
10	Leadership or fiduciary role	V. Nene			
10	in other board, society,	X None			
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	group, paid or unpaid				
11	Stock or stock options	X None			
12	Receipt of equipment,	X None			
	materials, drugs, medical writing, gifts or other				
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13	Other financial or non-	X None			
	financial interests				
Plea	Please summarize the above conflict of interest in the following box:				
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'	None.				

Date:	12-5-21
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Your Name: Likun Hou

Manuscript Title: Implementation of artificial intelligence in the histological assessment of pulmonary subsolid

nodules

Manuscript number	(if known):
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None.	PIE	Please summarize the above conflict of interest in the following box:				
	1	None.				

Date:	12-5-21

Your Name: Sheng Zhong

Manuscript Title: Implementation of artificial intelligence in the histological assessment of pulmonary subsolid

nodules

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	

5	Payment or honoraria for	X None		
	lectures, presentations,			
	speakers bureaus,			
	manuscript writing or			
	educational events			
6	Payment for expert	X None		
	testimony			
7	Support for attending	X None		
	meetings and/or travel			
8	Patents planned, issued or	X None		
	pending			
9	Participation on a Data	X None		
	Safety Monitoring Board or			
	Advisory Board			
10	Leadership or fiduciary role	X None		
	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-	None	I report employment at Tailai Biosciences Inc., Shenzhen,	
	financial interests		Chinia.	
Dlaa	Places summarize the above conflict of interest in the following hove			

I report employment at Tailai Biosciences Inc., Shenzhen, Chinia.	

Date:	12-5-21

Your Name: Shengxi Jin

Manuscript Title: Implementation of artificial intelligence in the histological assessment of pulmonary subsolid

nodules

Manuscript number (if known):	
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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
1	All support for the present manuscript (e.g., funding,	X None	
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	X None	
	any entity (if not indicated		
	in item #1 above).		
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		
6	Payment for expert	X None	
	testimony		
7	Support for attending	X None	
	meetings and/or travel		
8	Patents planned, issued or	X None	
	pending		
9	Participation on a Data	X None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	X None	
	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-	None	I report employment at Dianei Technology, Shanghai,
	financial interests		China
Dlas	se summarize the above co	nflict of interest in the	a following hov:

I report employment at Dianei Technology, Shanghai, China	

Date:	12-5-21

Your Name: Dahong Qian

Manuscript Title: Implementation of artificial intelligence in the histological assessment of pulmonary subsolid

nodules

Manuscript number	(if known):
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2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

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lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert testimony Support for attending meetings and/or travel Because Patents planned, issued or pending Participation on a Data Safety Monitoring Board or Advisory Board Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid Stock or stock options Paceipt of equipment, materials, drugs, medical writing, gifts or other services To the financial or non-financial interests Please summarize the above conflict of interest in the following box:					
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None.	PIE	ase summarize the above co	nflict of interest in the fol	lowing box:	
	1	None.			

Your Name: Dong Xie

Manuscript Title: Implementation of artificial intelligence in the histological assessment of pulmonary subsolid

nodules

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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		Time frame: Since the initial	planning of the work			
1	All support for the present	X None				
	manuscript (e.g., funding,					
	provision of study materials,					
	medical writing, article					
	processing charges, etc.)					
	No time limit for this item.					
	Time frame: past 36 months					
2	Grants or contracts from	X None				
	any entity (if not indicated					
	in item #1 above).					
3	Royalties or licenses	X None				
4	Consulting fees	X None				

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5	Payment or honoraria for	X None					
	lectures, presentations,						
	speakers bureaus,						
	manuscript writing or						
	educational events						
6	Payment for expert	X None					
	testimony						
7	Support for attending meetings and/or travel	X None					
8	Patents planned, issued or	X None					
	pending						
9	Participation on a Data	X None					
	Safety Monitoring Board or						
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10	Leadership or fiduciary role	X None					
	in other board, society,						
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11	Stock or stock options	X None					
12	Receipt of equipment,	X None					
	materials, drugs, medical						
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13	Other financial or non-	X None					
	financial interests	_					
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Ple	Please summarize the above conflict of interest in the following box:						
	None.						
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Date: 12-5-21

Your Name: Yuming Zhu

Manuscript Title: Implementation of artificial intelligence in the histological assessment of pulmonary subsolid

nodules

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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1	All support for the present manuscript (e.g., funding,	X None					
	provision of study materials,						
	medical writing, article						
	processing charges, etc.)						
	No time limit for this item.						
	Time frame: past 36 months						
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	any entity (if not indicated						
	in item #1 above).						
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						
6	Payment for expert	X None					
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7	Support for attending meetings and/or travel	X None					
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8	Patents planned, issued or	X None					
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9	Participation on a Data	X None					
	Safety Monitoring Board or						
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10	Leadership or fiduciary role	X None					
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11	Stock or stock options	X None					
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12	Receipt of equipment, materials, drugs, medical	X None					
	writing, gifts or other						
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13	Other financial or non-	X None		П			
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Plea	Please summarize the above conflict of interest in the following box:						
	rease saminarize the above connector interest in the following box.						
N	None.						

Data:	12-3-21
vale:	TZ-2-ZT

Your Name:_Yasmeen K. Tandon

Manuscript Title: Implementation of artificial intelligence in the histological assessment of pulmonary subsolid

nodules

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1	All support for the present manuscript (e.g., funding,	X None	
	provision of study materials,		
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2	Grants or contracts from	X None	
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3	Royalties or licenses	X None	
4	Consulting fees	X None	

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lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert testimony Support for attending meetings and/or travel Because Patents planned, issued or pending Participation on a Data Safety Monitoring Board or Advisory Board Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid Stock or stock options Paceipt of equipment, materials, drugs, medical writing, gifts or other services To the financial or non-financial interests Please summarize the above conflict of interest in the following box:					
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Advisory Board 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid 11 Stock or stock options 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services 13 Other financial or non-financial interests Please summarize the above conflict of interest in the following box:	9		X None		
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	1	None.			

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

Date: December 6, 2021

Your Name: Annemiek Snoeckx

Manuscript Title: Implementation of artificial intelligence in the histological assessment of pulmonary subsolid nodules

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).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	
5		None	

	Payment or honoraria for 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 pending	None	
9	Participation on a Data	None	
	Safety Monitoring Board or Advisory Board		
10	Leadership or fiduciary role	None	
10	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Possint of aguinment	None	
12	Receipt of equipment, materials, drugs, medical	None	
	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		

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

Date:	12-5-2	1	
Your	Name:	Feng	Jin

Manuscript Title: Implementation of artificial intelligence in the histological assessment of pulmonary subsolid

nodules

Manuscript number	(if known):		
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	testimony			
7	Support for attending meetings and/or travel	X None		
8	Patents planned, issued or	X None		
	pending			
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	Safety Monitoring Board or			
10	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	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			
Plea	Please summarize the above conflict of interest in the following box:			
N	one.			
Plea	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.

Date:	12-5-21

Your Name: Bentong Yu

Manuscript Title: Implementation of artificial intelligence in the histological assessment of pulmonary subsolid

nodules

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 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	X None	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	X None	
	any entity (if not indicated		
	in item #1 above).		
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				
6	Payment for expert	X None			
	testimony				
7	Support for attending meetings and/or travel	X None			
8	Patents planned, issued or	X None			
	pending				
9	Participation on a Data	X None			
	Safety Monitoring Board or				
10	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	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				
Plea	Please summarize the above conflict of interest in the following box:				
N	one.				
Plea	ase place an "X" next to the	following statement to in	dicate 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.

Date: 12-5-21

Your Name: Guofang Zhao

Manuscript Title: Implementation of artificial intelligence in the histological assessment of pulmonary subsolid

nodules

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	testimony			_
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	manda mee ests			
Ple	ase summarize the above co	nflict of interest in the fol	lowing box:	
			-	
	None.			

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

Date:	12-5-21

Your Name: Chang Chen

Manuscript Title: Implementation of artificial intelligence in the histological assessment of pulmonary subsolid

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