ICMJE DISCLOSURE FORM

Date:_____2023/10/10_____
Your Name:_____ Yanhua Tang _____
Manuscript Title:____ Deep learning-assisted development and validation of an algorithm for predicting the growth of persistent pure ground-glass 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.

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:

<u>X</u> **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:_____2023/10/10_____
Your Name:_____ Minzhen Li _____
Manuscript Title:_____ Deep learning-assisted development and validation of an algorithm for predicting the growth of persistent pure ground-glass nodules_____
Manuscript number (if known):_____

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13	Other financial or non-financial interests	__X__None	

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<u>X</u> **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:_____2023/10/10_____
Your Name:_____ Benke Lin _____
Manuscript Title:_____ Deep learning-assisted development and validation of an algorithm for predicting the growth of persistent pure ground-glass nodules_____
Manuscript number (if known):_____

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ICMJE DISCLOSURE FORM

Date:_____2023/10/10_____

Your Name:_____ Xuemin Tao _____

Manuscript Title:____ Deep learning-assisted development and validation of an algorithm for predicting the growth of persistent pure ground-glass 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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13	Other financial or non-financial interests	__X__None	

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None

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ICMJE DISCLOSURE FORM

Date:_____2023/10/10_____
Your Name:_____ Zhongyue Shi _____
Manuscript Title:_____ Deep learning-assisted development and validation of an algorithm for predicting the growth of persistent pure ground-glass nodules_____
Manuscript number (if known):_____

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ICMJE DISCLOSURE FORM

Date:_____2023/10/10_____

Your Name:_____ Xin Jin _____

Manuscript Title:_____ Deep learning-assisted development and validation of an algorithm for predicting the growth of persistent pure ground-glass nodules_____

Manuscript number (if known):_____

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None

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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:_____2023/9/18_____
Your Name:_____ Stefano Bongiolatti_____
Manuscript Title:_____ Deep learning-assisted development and validation of an algorithm for predicting the growth of persistent pure ground-glass pulmonary 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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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: 19 September 2023
Your Name: Sara Ricciardi
Manuscript Title: Deep learning-assisted development and validation of an algorithm for predicting the growth of persistent pure ground-glass pulmonary 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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13	Other financial or non-financial interests	____None	

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

I have no conflict of interest to declare

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: May 13, 2023
Your Name: Duilio Divisi
Manuscript Title: Deep learning-assisted development and validation of an algorithm for predicting the growth of persistent pure ground-glass pulmonary 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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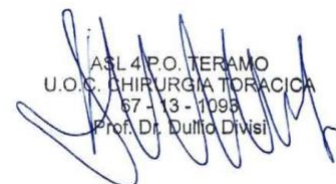|		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
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	speakers bureaus, manuscript writing or educational events		
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None

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ASL 4 P.O. TERAMO
U.O.C. CHIRURGIA TORACICA
67 - 13 - 1098
Prof. Dr. Duilio Divisi

ICMJE DISCLOSURE FORM

Date:_____18/09/2023_____

Your Name:__ _MARION DURAND_____

Manuscript Title:_ Deep learning-assisted development and validation of an algorithm for predicting the growth of persistent pure ground-glass pulmonary nodules

Manuscript number (if known):_____

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ICMJE DISCLOSURE FORM

Date:_____2023/9/25_____

Your Name:_____ Houssein A. Youness_____

Manuscript Title:_____ Deep learning-assisted development and validation of an algorithm for predicting the growth of persistent pure ground-glass nodules_____

Manuscript number (if known):_____

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ICMJE DISCLOSURE FORM

Date:__19/9/2023_____   _____
Your Name:__SHUICHI SHINOHARA_____
Manuscript Title: _ Deep learning-assisted development and validation of an algorithm for predicting the growth of persistent pure ground-glass pulmonary nodules _
Manuscript number (if known):_____

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Date:_____2023/10/10_____

Your Name:_____ Chuang Zhu _____

Manuscript Title:_____ Deep learning-assisted development and validation of an algorithm for predicting the growth of persistent pure ground-glass nodules_____

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Date:_____2023/10/10_____

Your Name:_____ Yi Liu _____

Manuscript Title:_____ Deep learning-assisted development and validation of an algorithm for predicting the growth of persistent pure ground-glass nodules_____

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