ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Ying

2. Surname (Last Name)  
   Li

3. Date  
   06-May-2020

4. Are you the corresponding author?  
   Yes ☑  No

Corresponding Author’s Name  
Wenli Cai

5. Manuscript Title  
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6. Manuscript Identifying Number (if you know it)  
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Dr. Li has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Guanghua
2. Surname (Last Name) Tan
3. Date 06-May-2020
4. Are you the corresponding author? Yes No ✔
   Corresponding Author's Name Wenli Cai
5. Manuscript Title
   Influence of Feature Calculating Parameters on the Reproducibility of CT Radiomic Features: A Thoracic Phantom Study
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Dr. Tan has nothing to disclose.

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Mark

2. Surname (Last Name)  
   Vangel

3. Date  
   06-May-2020

4. Are you the corresponding author?  
   Yes [ ]  No [x]

Corresponding Author’s Name

Wenli Cai

5. Manuscript Title  
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<th>2. Surname (Last Name)</th>
<th>3. Date</th>
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<tr>
<td>Jonathan</td>
<td>Hall</td>
<td>09-May-2020</td>
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4. Are you the corresponding author? [ ] Yes [✓] No

Corresponding Author's Name

Wenli Cai

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Dr. Hall has nothing to disclose.

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1. Given Name (First Name)
   Wenli

2. Surname (Last Name)
   Cai

3. Date
   09-May-2020

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   ☐ No

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Stockholder: IQ Medical Imaging LLC

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