ICMJE DISCLOSURE FORM

Date: 2024-05-25 Your Name: Xiangbo Li

Manuscript Title: A Mutual Reconstruction Network Model for Few-Shot Classification of Histological Images:

Addressing Inter-Class Similarity and Intra-Class Diversity

Manuscript number (if known): QIMS-24-253

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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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.

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		relationship or indicate	institution)
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		Time frame: Since the initial	planning of the work
1	All support for the present	the Department of Natural	Grant No. GDNRC[2023]47
	manuscript (e.g., funding,	Resources of Guangdong	
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	medical writing, article	National Key R&D Program	2021ZD0112501 and 2021ZD0112502
	processing charges, etc.)	of China under Grant Nos	
	No time limit for this item.	the National Natural	U22A2098, 62172185 and 61876069
		Science Foundation of	
		China under Grant Nos	
		Jilin Province Capital	No. 2022C0471
		Construction Fund	
		Industry Technology	
		Research and	
		Development Project	
		Changchun Key Scientific	No. 21ZGN30
		and Technological	
		Research and	
		Development Project	
		Jilin Province Natural	No.20200201036JC

		Science Foundation	
		Science Foundation	
		Time frame: past 36 months	
2	Grants or contracts from any entity (if not indicated in item #1 above).	None None	
3	Royalties or licenses	None	
4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None	
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None	
11	Stock or stock options	None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non- financial interests	None	

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

This work was supported by the Department of Natural Resources of Guangdong Province (Grant No. GDNRC[2023]47); National Key R&D Program of China under Grant Nos. 2021ZD0112501 and 2021ZD0112502; the National Natural Science Foundation of China under Grant Nos. U22A2098, 62172185 and 61876069; Jilin Province Capital Construction Fund Industry Technology Research and Development Project No. 2022C0471; Changchun Key Scientific and Technological Research and Development Project under Grant No. 21ZGN30; and Jilin Province Natural Science Foundation under Grant No.20200201036JC.

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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: 2024-05-25

Your Name: Yinghui Zhang

Manuscript Title: A Mutual Reconstruction Network Model for Few-Shot Classification of Histological Images:

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Manuscript number (if known): QIMS-24-253

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Date: 2024-05-25

Your Name: Fengxiang Ge

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