Date:2024.10	4	
Your Name:	Hongwei Shi	
Manuscript Title:	Analysis of Quality Intima-media ThicknessQIMT and Quantitative Artery StiffnessQA	<u>.S</u>
Technologies on No	-Alcoholic Fatty Liver Disease: A Study on Carotid Artery Structure, Elasticity, and Influe	<u>ential</u>
Factors in Patients_	_	
Manuscript number	if known): QIMS-24-1179	

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

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.

Date:2024.10.1	·
Your Name:	Jun Lan
Manuscript Title:	Analysis of Quality Intima-media ThicknessQIMT and Quantitative Artery StiffnessQAS
Technologies on Non	Alcoholic Fatty Liver Disease: A Study on Carotid Artery Structure, Elasticity, and Influential
Factors in Patients	
Manuscript number (f known): QIMS-24-1179

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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	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert	None	
Ü	testimony	None	
	,		
7	Support for attending meetings and/or travel	None	
	Ç ,		
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or Advisory Board		
10	Leadership or fiduciary role	None	
10	in other board, society,	None	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	None	
	financial interests		
Ple	ease summarize the above c	onflict of interest in the fol	lowing 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.

Date:2024.10.14	
Your Name: Zhenqiu Shang	
Manuscript Title: Analysis of Qu	uality Intima-media ThicknessQIMT and Quantitative Artery StiffnessQAS
Technologies on Non-Alcoholic Fatty	Liver Disease: A Study on Carotid Artery Structure, Elasticity, and Influential
Factors in Patients	
Manuscript number (if known):	QIMS-24-1179

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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	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	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	

5	Payment or honoraria for	None
	lectures, presentations,	
	speakers bureaus,	
	manuscript writing or	
	educational events	
6	Payment for expert	None
	testimony	
7	Cuppert for attending	None
7	Support for attending meetings and/or travel	None
8	Patents planned, issued or	None
	pending	
9	Participation on a Data	None
	Safety Monitoring Board or	
4.0	Advisory Board	N
10	Leadership or fiduciary role in other board, society,	None
	committee or advocacy	
	group, paid or unpaid	
11	Stock or stock options	None
12	Receipt of equipment,	None
	materials, drugs, medical	
	writing, gifts or other services	
13	Other financial or non-	None
	financial interests	
Dlo	assa summariza tha ahaya s	anflict of interest in the following have

one	

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:2024.10	.14				
Your Name:	Jinghua Xu				
Manuscript Title:	Analysis of Qualit	ty Intima-media Thicl	knessQIMT and (Quantitative Art	ery StiffnessQAS
Technologies on No	n-Alcoholic Fatty Liv	er Disease: A Study o	on Carotid Artery	Structure, Elas	ticity, and Influential
Factors in Patients					
Manuscript number	(if known):	QIMS-24-1179			

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		Time frame: Since the initial	planning of the work
1	All support for the present	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	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	

5		None
	lectures, presentations,	
	speakers bureaus,	
	manuscript writing or educational events	
_	Payment for expert	Nana
6	testimony	None
	testimony	
7	Support for attending	None
,	meetings and/or travel	Notice
	3	
8	Patents planned, issued or	None
	pending	
9	Participation on a Data Safety Monitoring Board or	None
	Advisory Board	
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,	None
	materials, drugs, medical	
	writing, gifts or other services	
13	Other financial or non-	None
	financial interests	

None.			

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

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Date:2024.10	.14		
Your Name:	Huiyang Wan	<u>g</u>	
Manuscript Title:	Analysis of Qu	ality Intima-media ThicknessQIMT and Quantitative Artery StiffnessQAS	
Technologies on No	n-Alcoholic Fatty	Liver Disease: A Study on Carotid Artery Structure, Elasticity, and Influent	ial
Factors in Patients_			
Manuscript numbe	r (if known):	QIMS-24-1179	

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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	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
_	educational events		
6	Payment for expert	None	
	testimony		
7	Compant for attending	Nene	
/	Support for attending meetings and/or travel	None	
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data Safety Monitoring Board or	None	
	Advisory Board		
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,	None	
	materials, drugs, medical		
	writing, gifts or other		
40	services		
13	Other financial or non-	None	
	financial interests		

None.

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Date:2024.10	14	_
Your Name:	<u>Limin Xu</u>	
Manuscript Title:	_ Analysis of Quality Intima-media ThicknessQIMT and Quantitative Artery StiffnessQAS	
Technologies on No	-Alcoholic Fatty Liver Disease: A Study on Carotid Artery Structure, Elasticity, and Influer	ıtial
Factors in Patients_	_	
Manuscript number	(if known): QIMS-24-1179	

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

Non	e.		

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Date:2024.10).14	
Your Name:	Tian'an Jiang	
Manuscript Title:	Analysis of Qua	lity Intima-media ThicknessQIMT and Quantitative Artery StiffnessQAS
Technologies on No	on-Alcoholic Fatty L	iver Disease: A Study on Carotid Artery Structure, Elasticity, and Influential
Factors in Patients		
Manuscript numbe	r (if known):	QIMS-24-1179

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		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
		none (add rows as	
		needed)	
		Time frame: Since the initial	planning of the work
1	All support for the present	None	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.) No time limit for this item.		
		Time frame: past	26 months
2	Grants or contracts from		56 Months
2		None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	

5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
_	educational events		
6	Payment for expert	None	
	testimony		
7	Compant for attending	Nege	
/	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	None	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other	None	
40	services		
13	Other financial or non-	None	
	financial interests		

None.

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