

## ICMJE DISCLOSURE FORM

Date: Oct 12, 2024

Your Name: Wenxin Cao

Manuscript Title: Cancer detection in patients with PSA levels within the grey zone: Can synthetic MRI aid in the differentiation between prostate cancer and noncancerous lesions?

Manuscript number (if known): QIMS-24-1014-R1

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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		Natural Science Outstanding Youth Fund of Guangdong Province	2024B1515020061
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## ICMJE DISCLOSURE FORM

Date: Oct 12, 2024

Your Name: Jinhua Lin

Manuscript Title: Cancer detection in patients with PSA levels within the grey zone: Can synthetic MRI aid in the differentiation between prostate cancer and noncancerous lesions?

Manuscript number (if known): QIMS-24-1014-R1

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## ICMJE DISCLOSURE FORM

Date: Oct 12, 2024

Your Name: Yanling Chen

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## ICMJE DISCLOSURE FORM

Date: Oct 12, 2024

Your Name: Jian Ling

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## ICMJE DISCLOSURE FORM

Date: Oct 12, 2024

Your Name: Tiebao Meng

Manuscript Title: Cancer detection in patients with PSA levels within the grey zone: Can synthetic MRI aid in the differentiation between prostate cancer and noncancerous lesions?

Manuscript number (if known): QIMS-24-1014-R1

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## ICMJE DISCLOSURE FORM

Date: Oct 12, 2024

Your Name: Zihua Wen

Manuscript Title: Cancer detection in patients with PSA levels within the grey zone: Can synthetic MRI aid in the differentiation between prostate cancer and noncancerous lesions?

Manuscript number (if known): QIMS-24-1014-R1

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## ICMJE DISCLOSURE FORM

Date: Oct 12, 2024

Your Name: Chuanmiao Xie

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Your Name: Yan Guo

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2	Grants or contracts from any entity (if not indicated in item #1 above).	<input checked="" type="checkbox"/> X <input type="checkbox"/> None	
3	Royalties or licenses	<input checked="" type="checkbox"/> X <input type="checkbox"/> None	

4	Consulting fees	<input checked="" type="checkbox"/> X <input type="checkbox"/> None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input checked="" type="checkbox"/> X <input type="checkbox"/> None	
6	Payment for expert testimony	<input checked="" type="checkbox"/> X <input type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> X <input type="checkbox"/> None	
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> X <input type="checkbox"/> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> X <input type="checkbox"/> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input checked="" type="checkbox"/> X <input type="checkbox"/> None	
11	Stock or stock options	<input checked="" type="checkbox"/> X <input type="checkbox"/> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> X <input type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> X <input type="checkbox"/> None	

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This work was supported by the National Natural Science Foundation of China (Nos. 82372075, 82371911, 82071989), Natural Science Outstanding Youth Fund of Guangdong Province (2024B1515020061).

**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: Oct 12, 2024

Your Name: Weijing Zhang

Manuscript Title: Cancer detection in patients with PSA levels within the grey zone: Can synthetic MRI aid in the differentiation between prostate cancer and noncancerous lesions?

Manuscript number (if known): QIMS-24-1014-R1

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)
<b>Time frame: Since the initial planning of the work</b>			
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) <b>No time limit for this item.</b>	National Natural Science Foundation of China	Nos. 82372075, 82371911, 82071989
		Natural Science Outstanding Youth Fund of Guangdong Province	2024B1515020061
<b>Time frame: past 36 months</b>			
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## ICMJE DISCLOSURE FORM

Date: Oct 12, 2024

Your Name: Huanjun Wang

Manuscript Title: Cancer detection in patients with PSA levels within the grey zone: Can synthetic MRI aid in the differentiation between prostate cancer and noncancerous lesions?

Manuscript number (if known): QIMS-24-1014-R1

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