Date:___2024-08-15_____ Your Name:___Yanling Chen___ Manuscript Title:__Optimizing Prostate Biopsy Decision-Making for Patients with Prostate Imaging-Reporting and Data System (PI-RADS) ≥ 3 Lesions: Novel magnetic resonance imaging(MRI)-based Nomograms______ Manuscript number (if known):______QIMS-24-1072_____

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	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	XNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
C		Y Nore	
6	Payment for expert	XNone	
	testimony		
7	Support for attending	XNone	
	meetings and/or travel		
	-		
8	Patents planned, issued or pending	XNone	
9	Participation on a Data	X None	
5	Safety Monitoring Board or		
	Advisory Board		
10	. ,	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X None	
12	Receipt of equipment,	X None	
12	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

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Date:___2024-08-15_____ Your Name:___Jinhua Lin___ Manuscript Title:__Optimizing Prostate Biopsy Decision-Making for Patients with Prostate Imaging-Reporting and Data System (PI-RADS) ≥ 3 Lesions: Novel magnetic resonance imaging(MRI)-based Nomograms______ Manuscript number (if known):______QIMS-24-1072_____

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Date:___2024-08-15_____ Your Name:___Wenxin Cao___ Manuscript Title:__Optimizing Prostate Biopsy Decision-Making for Patients with Prostate Imaging-Reporting and Data System (PI-RADS) ≥ 3 Lesions: Novel magnetic resonance imaging(MRI)-based Nomograms______ Manuscript number (if known):_____QIMS-24-1072_____

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Date:___2024-08-15_____ Your Name:___Tiebao Meng___ Manuscript Title:__Optimizing Prostate Biopsy Decision-Making for Patients with Prostate Imaging-Reporting and Data System (PI-RADS) ≥ 3 Lesions: Novel magnetic resonance imaging(MRI)-based Nomograms______ Manuscript number (if known):_____QIMS-24-1072_____

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7	Support for attending	XNone	
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9	Participation on a Data	X None	
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	educational events		
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6	Payment for expert	XNone	
	testimony		
7	Support for attending	XNone	
	meetings and/or travel		
	-		
8	Patents planned, issued or pending	XNone	
9	Participation on a Data	X None	
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	Advisory Board		
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	committee or advocacy		
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Date: 2024-08-15 Your Name: Zhihua Wen_ Manuscript Title: Optimizing Prostate Biopsy Decision-Making for Patients with Prostate Imaging-Reporting and Data System (PI-RADS) \geq 3 Lesions: Novel magnetic resonance imaging (MRI)-based Nomograms

Manuscript number (if known):_ QIMS-24-1072

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3	Royalties or licenses	X_None
4	Consulting fees	XNone
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	XNone
8	Patents planned, issued or pending	XNone
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	_XNone
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None
13	Other financial or non- financial interests	X_None

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 Date: ____2024-08-15_____

 Your Name: ___Lingmin Kong__

 Manuscript Title: __Optimizing Prostate Biopsy Decision-Making for Patients with Prostate Imaging

 Reporting and Data System (PI-RADS) ≥ 3 Lesions: Novel magnetic resonance imaging(MRI)-based

 Nomograms_____

 Manuscript number (if known): _____
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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
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13	Other financial or non- financial interests	X_None

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 Date: ____2024-08-15_____

 Your Name: ___Long Qian__

 Manuscript Title: __Optimizing Prostate Biopsy Decision-Making for Patients with Prostate Imaging

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 Date: ____2024-08-15_____

 Your Name: ___Yan Guo__

 Manuscript Title: __Optimizing Prostate Biopsy Decision-Making for Patients with Prostate Imaging

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 Date: ____2024-08-15_____

 Your Name: ___Weijing Zhang___

 Manuscript Title: __Optimizing Prostate Biopsy Decision-Making for Patients with Prostate Imaging

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Date: ___2024-08-15_____ Your Name: ___Huanjun Wang___ Manuscript Title: __Optimizing Prostate Biopsy Decision-Making for Patients with Prostate Imaging-Reporting and Data System (PI-RADS) ≥ 3 Lesions: Novel magnetic resonance imaging(MRI)-based Nomograms_____

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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.	National Natural Science Foundation of China	No. 82071989, 82372075, and 82371911
	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	XNone
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	XNone
8	Patents planned, issued or pending	XNone
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	_XNone
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None
13	Other financial or non- financial interests	X_None

 $_$ X___ I certify that I have answered every question and have not altered the wording of any of the questions on this