| Date: | 2/26/2022 |
|-------------------------------|--|
| Your Name: | Bin Yang |
| Manuscript Title: | A deep learning system for predicting glaucoma incidence and progression using retinal photographs |
| Manuscript Number (if known): | 157968-JCI-CMED-RV-2 |

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.

The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

| · · · · · · · · · · · · · · · · · · · | | Specifications/Comments (e.g., if payments were made to you or to your institution) | |
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| 1 | All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for | None Time frame: Since the initial planning of the in | of the work Click the tab key to add additional rows. |
| | this item. | Time frame: past 36 month | S |
| 2 | Grants or contracts from any entity (if not indicated in item #1 above). | None | |
| 3 | Royalties or licenses | None | |

| | | | Specifications/Comments (e.g., if payments were made to you or to your institution) |
|----|---|-----------|---|
| 4 | Consulting fees | None 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 | |

| | | | entities with whom you have this thip or indicate none (add rows as needed) | Specifications/Comments (e.g., if payments were made to you or to your institution) |
|------|---|-----|---|---|
| 11 | Stock or stock options | No. | one | |
| 12 | Receipt of equipment, materials, drugs, medical writing, gifts or other services | No. | one | |
| 13 | Other financial or non-financial interests | No. | one | |
| Plea | Please place an "X" next to the following statement to indicate your agreement: I certify that I have answered every question and have not altered the wording of any of the questions on this form. | | | |

| Date: | 2/26/2022 |
|-------------------------------|--|
| Your Name: | Chunman Yang |
| Manuscript Title: | A deep learning system for predicting glaucoma incidence and progression using retinal photographs |
| Manuscript Number (if known): | 157968-JCI-CMED-RV-2 |

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| 4 | Consulting fees | None 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 | |
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| Date: | 2/26/2022 |
|-------------------------------|--|
| Your Name: | Fanyin Wang |
| Manuscript Title: | A deep learning system for predicting glaucoma incidence and progression using retinal photographs |
| Manuscript Number (if known): | 157968-JCI-CMED-RV-2 |

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| 6 | Payment for expert testimony | None | |
| 7 | Support for attending meetings and/or travel | None | |
| 8 | Patents planned, issued or pending | None | |
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| Date: | 2/26/2022 |
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| Your Name: | Fei Li |
| Manuscript Title: | A deep learning system for predicting glaucoma incidence and progression using retinal photographs |
| Manuscript Number (if known): | 157968-JCI-CMED-RV-2 |

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| Date: | 2/26/2022 |
|-------------------------------|--|
| Your Name: | Fengbin Lin |
| Manuscript Title: | A deep learning system for predicting glaucoma incidence and progression using retinal photographs |
| Manuscript Number (if known): | 157968-JCI-CMED-RV-2 |

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| 6 | Payment for expert testimony | None | |
| 7 | Support for attending meetings and/or travel | None | |
| 8 | Patents planned, issued or pending | None | |
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| Date: | 2/26/2022 |
|-------------------------------|--|
| Your Name: | Hao Li |
| Manuscript Title: | A deep learning system for predicting glaucoma incidence and progression using retinal photographs |
| Manuscript Number (if known): | 157968-JCI-CMED-RV-2 |

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| 8 | Patents planned, issued or pending | None | |
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| Date: | 2/26/2022 |
|-------------------------------|--|
| Your Name: | Huixin Che |
| Manuscript Title: | A deep learning system for predicting glaucoma incidence and progression using retinal photographs |
| Manuscript Number (if known): | 157968-JCI-CMED-RV-2 |

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| 6 | Payment for expert testimony | None | |
| 7 | Support for attending meetings and/or travel | None | |
| 8 | Patents planned, issued or pending | None | |
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| Date: | 2/26/2022 |
|-------------------------------|--|
| Your Name: | Huiying Zhang |
| Manuscript Title: | A deep learning system for predicting glaucoma incidence and progression using retinal photographs |
| Manuscript Number (if known): | 157968-JCI-CMED-RV-2 |

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| Date: | 2/26/2022 |
|-------------------------------|--|
| Your Name: | Jie Xu |
| Manuscript Title: | A deep learning system for predicting glaucoma incidence and progression using retinal photographs |
| Manuscript Number (if known): | 157968-JCI-CMED-RV-2 |

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| 8 | Patents planned, issued or pending | None | |
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| Date: | | - | 2/26/2022 | | |
|--|---|--|--|---|--|
| Your Name: | | | Kang Zhang | | |
| Manuscript Title: | | - | A deep learning system for predicting glaucoma incidence and progression using retinal photographs | | |
| Mar | nuscript Number (if I | known): | 157968-JCI-CMED-RV-2 | | |
| content of your manuscript. "Rela affected by the content of the ma indicate a bias. If you are in doub The author's relationships/activiti epidemiology of hypertension, yo that medication is not mentioned | | ript. "Rela of the mar re in doubt ps/activitie ension, you nentioned | e ask you to disclose all relationships/activities/interests listed below that are related to the ated" means any relation with for-profit or not-for-profit third parties whose interests may be nuscript. Disclosure represents a commitment to transparency and does not necessarily t about whether to list a relationship/activity/interest, it is preferable that you do so. es/interests should be defined broadly. For example, if your manuscript pertains to the u should declare all relationships with manufacturers of antihypertensive medication, even if in the manuscript. | | |
| | ne for disclosure is th | | | | |
| | | | entities with whom you have this hip or indicate none (add rows as needed) | Specifications/Comments (e.g., if payments were made to you or to your institution) | |
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| 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. | | University of Science and Technology | Click the tab key to add additional rows. | |
| | | | Time frame: past 36 month | s | |
| 2 | Grants or contracts from any entity (if not indicated in item #1 above). | 1 1 | 070/2020/A2) | | |
| 3 | Royalties or licenses | ⊠ No | one | | |

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| Date: | 2/26/2022 |
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| Your Name: | Kanmin Xue |
| Manuscript Title: | A deep learning system for predicting glaucoma incidence and progression using retinal photographs |
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| 10 | Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid | None None | |

| | | 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) |
|--------|---|--|---|
| 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 | |
| Plea 🖂 | Please place an "X" next to the following statement to indicate your agreement: I certify that I have answered every question and have not altered the wording of any of the questions on this form. | | |

| Date: | 2/26/2022 |
|-------------------------------|--|
| Your Name: | Lina Chen |
| Manuscript Title: | A deep learning system for predicting glaucoma incidence and progression using retinal photographs |
| Manuscript Number (if known): | 157968-JCI-CMED-RV-2 |

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.

The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

| | | e all entities with whom you have this onship 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 | Click the tab key to add additional rows. |
| | | Time frame: past 36 month | S |
| 2 | Grants or contracts from any entity (if not indicated in item #1 above). | None | |
| 3 | Royalties or licenses | None | |

| | | | Specifications/Comments (e.g., if payments were made to you or to your institution) |
|----|---|-------------|---|
| 4 | Consulting fees | None None □ | |
| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events | None None | |
| 6 | Payment for expert testimony | None | |
| 7 | Support for attending meetings and/or travel | None 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 None | |

| | | 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) |
|--------|---|--|---|
| 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 | |
| Plea 🖂 | Please place an "X" next to the following statement to indicate your agreement: I certify that I have answered every question and have not altered the wording of any of the questions on this form. | | |

| Date: | 2/26/2022 |
|-------------------------------|--|
| Your Name: | Linjiang Chen |
| Manuscript Title: | A deep learning system for predicting glaucoma incidence and progression using retinal photographs |
| Manuscript Number (if known): | 157968-JCI-CMED-RV-2 |

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| 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 month. | Click the tab key to add additional rows. |
| 2 | Grants or contracts from any entity (if not indicated in item #1 above). | None | |
| 3 | Royalties or licenses | None | |

| | | | Specifications/Comments (e.g., if payments were made to you or to your institution) |
|----|---|-----------|---|
| 4 | Consulting fees | None 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 | |

| | | | entities with whom you have this thip or indicate none (add rows as needed) | Specifications/Comments (e.g., if payments were made to you or to your institution) |
|------|---|-----|---|---|
| 11 | Stock or stock options | No. | one | |
| 12 | Receipt of equipment, materials, drugs, medical writing, gifts or other services | No. | one | |
| 13 | Other financial or non-financial interests | No. | one | |
| Plea | Please place an "X" next to the following statement to indicate your agreement: I certify that I have answered every question and have not altered the wording of any of the questions on this form. | | | |

| Date: | 2/26/2022 |
|-------------------------------|--|
| Your Name: | Ming Ge |
| Manuscript Title: | A deep learning system for predicting glaucoma incidence and progression using retinal photographs |
| Manuscript Number (if known): | 157968-JCI-CMED-RV-2 |

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| 2 | Grants or contracts from any entity (if not indicated in item #1 above). | | None | |
| 3 | Royalties or licenses | | None | |

| | | | Specifications/Comments (e.g., if payments were made to you or to your institution) |
|----|---|-----------|---|
| 4 | Consulting fees | None 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 | |

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| 12 | Receipt of equipment, materials, drugs, medical writing, gifts or other services | No. | one | |
| 13 | Other financial or non-financial interests | No. | one | |
| Plea | Please place an "X" next to the following statement to indicate your agreement: I certify that I have answered every question and have not altered the wording of any of the questions on this form. | | | |

| Date: | 2/26/2022 |
|-------------------------------|--|
| Your Name: | Sheng Nie |
| Manuscript Title: | A deep learning system for predicting glaucoma incidence and progression using retinal photographs |
| Manuscript Number (if known): | 157968-JCI-CMED-RV-2 |

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| | | | Time frame: Since the initial planning | of the work |
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| 2 | Grants or contracts from any entity (if not indicated in item #1 above). | | None | |
| 3 | Royalties or licenses | | None | |

| | | | Specifications/Comments (e.g., if payments were made to you or to your institution) |
|----|---|-----------|---|
| 4 | Consulting fees | None 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 | |

| | | | entities with whom you have this thip or indicate none (add rows as needed) | Specifications/Comments (e.g., if payments were made to you or to your institution) |
|------|---|-----|---|---|
| 11 | Stock or stock options | No. | one | |
| 12 | Receipt of equipment, materials, drugs, medical writing, gifts or other services | No. | one | |
| 13 | Other financial or non-financial interests | No. | one | |
| Plea | Please place an "X" next to the following statement to indicate your agreement: I certify that I have answered every question and have not altered the wording of any of the questions on this form. | | | |

| Date: | 2/26/2022 |
|-------------------------------|--|
| Your Name: | Shiyan Chen |
| Manuscript Title: | A deep learning system for predicting glaucoma incidence and progression using retinal photographs |
| Manuscript Number (if known): | 157968-JCI-CMED-RV-2 |

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|---|--|---|---|
| 1 | All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for | None | of the work Click the tab key to add additional rows. |
| | this item. | Time frame: past 36 month | S |
| 2 | Grants or contracts from any entity (if not indicated in item #1 above). | None | |
| 3 | Royalties or licenses | None | |

| | | | Specifications/Comments (e.g., if payments were made to you or to your institution) |
|----|---|-----------|---|
| 4 | Consulting fees | None 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 | |

| | | | entities with whom you have this thip or indicate none (add rows as needed) | Specifications/Comments (e.g., if payments were made to you or to your institution) |
|------|---|-----|---|---|
| 11 | Stock or stock options | No. | one | |
| 12 | Receipt of equipment, materials, drugs, medical writing, gifts or other services | No. | one | |
| 13 | Other financial or non-financial interests | No. | one | |
| Plea | Please place an "X" next to the following statement to indicate your agreement: I certify that I have answered every question and have not altered the wording of any of the questions on this form. | | | |

| Date: | 2/26/2022 |
|-------------------------------|--|
| Your Name: | Wanlin Li |
| Manuscript Title: | A deep learning system for predicting glaucoma incidence and progression using retinal photographs |
| Manuscript Number (if known): | 157968-JCI-CMED-RV-2 |

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| | | Name all entities with whom you have this relationship or indicate none (add rows as | |
|---|---|--|---|
| | | Time frame: Since the initia | al 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 | Click the tab key to add additional rows. |
| 2 | Grants or contracts from any entity (if not indicated in item #1 above). | None | |
| 3 | Royalties or licenses | None | |

| | | | Specifications/Comments (e.g., if payments were made to you or to your institution) |
|----|---|-----------|---|
| 4 | Consulting fees | None 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 | |

| | | 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) |
|--------|---|--|---|
| 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 | |
| Plea 🖂 | Please place an "X" next to the following statement to indicate your agreement: I certify that I have answered every question and have not altered the wording of any of the questions on this form. | | |

| Date: | 2/26/2022 |
|-------------------------------|--|
| Your Name: | Weihui Zhong |
| Manuscript Title: | A deep learning system for predicting glaucoma incidence and progression using retinal photographs |
| Manuscript Number (if known): | 157968-JCI-CMED-RV-2 |

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| | | e all entities with whom you have this onship or indicate none (add rows as needed) | Specifications/Comments (e.g., if payments were made to you or to your institution) |
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| | | 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 | Click the tab key to add additional rows. |
| | | Time frame: past 36 month | S |
| 2 | Grants or contracts from any entity (if not indicated in item #1 above). | None | |
| 3 | Royalties or licenses | None | |

| | | | Specifications/Comments (e.g., if payments were made to you or to your institution) |
|----|---|-----------|---|
| 4 | Consulting fees | None 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 | |

| | | 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) |
|--------|---|--|---|
| 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 | |
| Plea 🖂 | Please place an "X" next to the following statement to indicate your agreement: I certify that I have answered every question and have not altered the wording of any of the questions on this form. | | |

| Date: | 2/26/2022 |
|--|--|
| Your Name: | Xiulan Zhang |
| Manuscript Title: | A deep learning system for predicting glaucoma incidence and progression using retinal photographs |
| Manuscript Number (if known): | 157968-JCI-CMED-RV-2 |
| 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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|---|---|--|---|
| | | 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. | Sun Yat-sen University National Natural Science Foundation of China Guangzhou Municipal Science and Technology Bureau | Click the tab key to add additional rows. |
| | | Time frame: past 36 month | s |
| 2 | Grants or contracts from any entity (if not indicated in item #1 above). | National Natural Science Foundation of China (82101117, 82070955) High-level Hospital Construction Project, Zhongshan Ophthalmic Center, Sun Yat-sen University (303020104), Science and Technology Program of Guangzhou, China (2021) | |

| | | 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) |
|----|--|--|---|
| 3 | Royalties or licenses | None None | |
| 4 | Consulting fees | None 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, | ⊠ None | |

| | | 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) |
|------|--|--|---|
| | 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 services | None | |
| 13 | Other financial or non-financial interests | None | |
| Plea | | t to the following statement to indicate your agreeme answered every question and have not altered the wo | |

| Date: | 2/26/2022 |
|-------------------------------|--|
| Your Name: | Yingjie Li |
| Manuscript Title: | A deep learning system for predicting glaucoma incidence and progression using retinal photographs |
| Manuscript Number (if known): | 157968-JCI-CMED-RV-2 |

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| 2 | Grants or contracts from any entity (if not indicated in item #1 above). | None | |
| 3 | Royalties or licenses | None | |

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| 4 | Consulting fees | None 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 | |

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| 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 | |
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| Date: | 2/26/2022 |
|-------------------------------|--|
| Your Name: | Yong Zhou |
| Manuscript Title: | A deep learning system for predicting glaucoma incidence and progression using retinal photographs |
| Manuscript Number (if known): | 157968-JCI-CMED-RV-2 |

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| 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 | |
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| 12 | Receipt of equipment, materials, drugs, medical writing, gifts or other services | None | |
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| Date: | 2/26/2022 |
|-------------------------------|--|
| Your Name: | Yuandong Su |
| Manuscript Title: | A deep learning system for predicting glaucoma incidence and progression using retinal photographs |
| Manuscript Number (if known): | 157968-JCI-CMED-RV-2 |

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| 3 | Royalties or licenses | None | |

| | | | Specifications/Comments (e.g., if payments were made to you or to your institution) |
|----|---|-----------|---|
| 4 | Consulting fees | None 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 | |

| | | 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) |
|--------|---|--|---|
| 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 | |
| Plea 🖂 | | t to the following statement to indicate your agreeme answered every question and have not altered the wo | |

| Date: | 2/26/2022 |
|-------------------------------|--|
| Your Name: | Yuanxu Gao |
| Manuscript Title: | A deep learning system for predicting glaucoma incidence and progression using retinal photographs |
| Manuscript Number (if known): | 157968-JCI-CMED-RV-2 |

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The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

| | | e all entities with whom you have this onship 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 month. | Click the tab key to add additional rows. |
| 2 | Grants or contracts from any entity (if not indicated in item #1 above). | None | |
| 3 | Royalties or licenses | None | |

| | | | Specifications/Comments (e.g., if payments were made to you or to your institution) |
|----|---|-----------|---|
| 4 | Consulting fees | None 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 | |
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| 12 | Receipt of equipment, materials, drugs, medical writing, gifts or other services | None | |
| 13 | Other financial or non-financial interests | None | |
| Plea 🖂 | | t to the following statement to indicate your agreeme answered every question and have not altered the wo | |

| Date: | 2/26/2022 |
|-------------------------------|--|
| Your Name: | Yunhe Song |
| Manuscript Title: | A deep learning system for predicting glaucoma incidence and progression using retinal photographs |
| Manuscript Number (if known): | 157968-JCI-CMED-RV-2 |

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| 6 | Payment for expert testimony | None | |
| 7 | Support for attending meetings and/or travel | None | |
| 8 | Patents planned, issued or pending | None | |
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| 13 | Other financial or non-financial interests | None | |
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| Date: | 2/26/2022 |
|-------------------------------|--|
| Your Name: | Yunqin Jia |
| Manuscript Title: | A deep learning system for predicting glaucoma incidence and progression using retinal photographs |
| Manuscript Number (if known): | 157968-JCI-CMED-RV-2 |

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| 6 | Payment for expert testimony | None | |
| 7 | Support for attending meetings and/or travel | None | |
| 8 | Patents planned, issued or pending | None | |
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| 10 | Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid | None | |

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| 11 | Stock or stock options | No. | one | |
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| 13 | Other financial or non-financial interests | No. | one | |
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| Date: | 2/26/2022 |
|-------------------------------|--|
| Your Name: | Yuqing Wu |
| Manuscript Title: | A deep learning system for predicting glaucoma incidence and progression using retinal photographs |
| Manuscript Number (if known): | 157968-JCI-CMED-RV-2 |

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| 6 | Payment for expert testimony | None | |
| 7 | Support for attending meetings and/or travel | None | |
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| Date: | 2/26/2022 |
|-------------------------------|--|
| Your Name: | Zhengui Chen |
| Manuscript Title: | A deep learning system for predicting glaucoma incidence and progression using retinal photographs |
| Manuscript Number (if known): | 157968-JCI-CMED-RV-2 |

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| 3 | Royalties or licenses | | None | |

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| 6 | Payment for expert testimony | None | |
| 7 | Support for attending meetings and/or travel | None | |
| 8 | Patents planned, issued or pending | None | |
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| Date: | 2/26/2022 |
|-------------------------------|--|
| Your Name: | Zhihuan Li |
| Manuscript Title: | A deep learning system for predicting glaucoma incidence and progression using retinal photographs |
| Manuscript Number (if known): | 157968-JCI-CMED-RV-2 |

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| 2 | Grants or contracts from any entity (if not indicated in item #1 above). | None | | | | | |
| 3 | Royalties or licenses | None Non | | | | | |

| | | | Specifications/Comments (e.g., if payments were made to you or to your institution) |
|----|---|-------------|---|
| 4 | Consulting fees | None None □ | |
| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events | None None | |
| 6 | Payment for expert testimony | None | |
| 7 | Support for attending meetings and/or travel | None None | |
| 8 | Patents planned, issued or pending | None | |
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| 11 | Stock or stock options | ⊠ None | | |
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