

ICMJE DISCLOSURE FORM

Date: 3/10/2024

Your Name: Xueling Bai

Manuscript Title: **Panoramic heat map for spatial distribution of necrotic lesions: a new three-dimensional measurement system**

Manuscript Number (if known): BJR-2023-0181

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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Date: 3/10/2024

Your Name: Da Guo

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Date: 3/10/2024

Your Name: Wei He

Manuscript Title: Panoramic heat map for spatial distribution of necrotic lesions: a new three-dimensional measurement system

Manuscript Number (if known): BJR-2023-0181

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Date: 3/10/2024

Your Name: Luoyong Jiang

Manuscript Title: **Panoramic heat map for spatial distribution of necrotic lesions: a new three-dimensional measurement system**

Manuscript Number (if known): BJR-2023-0181

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ICMJE DISCLOSURE FORM

Date: 3/10/2024

Your Name: Pang Yang

Manuscript Title: **Panoramic heat map for spatial distribution of necrotic lesions: a new three-dimensional measurement system**

Manuscript Number (if known): BJR-2023-0181

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ICMJE DISCLOSURE FORM

Date: 3/10/2024

Your Name: Weiming Yang

Manuscript Title: **Panoramic heat map for spatial distribution of necrotic lesions: a new three-dimensional measurement system**

Manuscript Number (if known): BJR-2023-0181

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Date: 3/10/2024

Your Name: Wei Sun

Manuscript Title: **Panoramic heat map for spatial distribution of necrotic lesions: a new three-dimensional measurement system**

Manuscript Number (if known): BJR-2023-0181

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Your Name: Weichao Sun

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	society, committee or advocacy group, paid or unpaid		
11	Stock or stock options	<input checked="" type="checkbox"/> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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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: 3/10/2024

Your Name: Qingwen Zhang

Manuscript Title: **Panoramic heat map for spatial distribution of necrotic lesions: a new three-dimensional measurement system**

Manuscript Number (if known): BJR-2023-0181

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.	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; height: 40px; margin-top: 5px;"> <tr><td style="width: 50%;"></td><td style="width: 50%;"></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>							
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2	Grants or contracts from any entity (if not indicated in item #1 above).	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; height: 40px; margin-top: 5px;"> <tr><td style="width: 50%;"></td><td style="width: 50%;"></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>							

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