ICMJE DISCLOSURE FORM

Date: 5/8/2022
Your Name: Jing Liang
Manuscript Title: Iodine-based Extracellular Volume for Evaluating Myocardial Status in Patients Who Received Percutaneous Coronary Intervention for Acute Myocardial Infarction by Using Dual-layer Spectral Detector CT: a Comparison Study with MR
Manuscript number (if known): QIMS-21-1103-R4

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 following questions apply to the author’s relationships/activities/interests as they relate to the current manuscript only.

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.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

|   | 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) |
|---|--------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| 1 | All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) | **Natural Science Foundation of China**<br>92068116<br>**Natural Science Foundation of China**<br>81870358<br>**the Key Projects of Science and Technology of Jiangsu Province**<br>BE2019602<br>**the Science Fund for Distinguished Young Scholars in Jiangsu Province; the Innovation and Development Projects of High Level talents in Jiangsu Province**<br>JSSCBS20211534 |

Time frame: Since the initial planning of the work
| No. | Description                                                                 | Status |
|-----|------------------------------------------------------------------------------|--------|
| 1   | Entrepreneurship Doctoral Foundation                                          |        |
|     | the Nanjing Medical Science and technique Development Foundation              | ZXX19018 |
|     | the Nanjing Medical Science and technique Development Foundation              | QRX17057 |
|     | China Postdoctoral Science Foundation                                         | 2019M661804 |
|     | Jiangsu Province Postdoctoral Science Foundation                              | 2019k060 |

**Time frame: past 36 months**

| No. | Description                                                                 | Status |
|-----|------------------------------------------------------------------------------|--------|
| 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 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,                         | None   |
|   | committee or advocacy group, paid or unpaid |   |
|---|------------------------------------------|---|
| 11 | Stock or stock options                   | __X__None |
| 12 | Receipt of equipment, materials, drugs, medical writing, gifts or other services | __X__None |
| 13 | Other financial or non-financial interests | __X__None |

Please summarize the above conflict of interest in the following box:

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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: 5/8/2022
Your Name: Hui Li
Manuscript Title: Iodine-based Extracellular Volume for Evaluating Myocardial Status in Patients Who Received Percutaneous Coronary Intervention for Acute Myocardial Infarction by Using Dual-layer Spectral Detector CT: a Comparison Study with MR
Manuscript number (if known): QIMS-21-1103-R4

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|   |                                                                                  | Natural Science Foundation of China 81870358                      |
|   |                                                                                  | the Key Projects of Science and Technology of Jiangsu Province BE2019602 to add additional rows. |
|   |                                                                                  | the Science Fund for Distinguished Young Scholars in Jiangsu Province; the Innovation and JSSCBS20211534 |
| Entrepreneurship Doctoral Foundation | ZKX19018 |
|--------------------------------------|----------|
| the Nanjing Medical Science and technique Development Foundation | QRX17057 |
| China Postdoctoral Science Foundation | 2019M661804 |
| Jiangsu Province Postdoctoral Science Foundation | 2019k060 |

**Time frame: past 36 months**

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| 2 | Royalties or licenses                                                     | X_None |
| 3 | Consulting fees                                                           | X_None |
| 4 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events | X_None |
| 5 | Payment for expert testimony                                              | X_None |
| 6 | Support for attending meetings and/or travel                              | X_None |
| 7 | Patents planned, issued or pending                                        | X_None |
| 8 | Participation on a Data Safety Monitoring Board or Advisory Board         | X_None |
| 9 | Leadership or fiduciary role in other board, society,                     | X_None |
| 11 | Stock or stock options | __X__None |
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ICMJE DISCLOSURE FORM

Date: 5/8/2022
Your Name: Jun Xie
Manuscript Title: Iodine-based Extracellular Volume for Evaluating Myocardial Status in Patients Who Received Percutaneous Coronary Intervention for Acute Myocardial Infarction by Using Dual-layer Spectral Detector CT: a Comparison Study with MR
Manuscript number (if known): QIMS-21-1103-R4

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| 6 | Payment for expert testimony | X None |
| 7 | Support for attending meetings and/or travel | X None |
| 8 | Patents planned, issued or pending | X None |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board | X None |
| 10 | Leadership or fiduciary role in other board, society, | X None |
| Question                                                                 | Answer |
|-------------------------------------------------------------------------|--------|
| committee or advocacy group, paid or unpaid                              |        |
| 11 Stock or stock options                                               | _X_ None |
| 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: 5/8/2022
Your Name: Hongming Yu
Manuscript Title: Iodine-based Extracellular Volume for Evaluating Myocardial Status in Patients Who Received Percutaneous Coronary Intervention for Acute Myocardial Infarction by Using Dual-layer Spectral Detector CT: a Comparison Study with MR
Manuscript number (if known): QIMS-21-1103-R4

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Natural Science Foundation of China 81870358  
the Key Projects of Science and Technology of Jiangsu Province BE2019602 to add additional rows  
the Science Fund for Distinguished Young Scholars in Jiangsu Province; the Innovation and JSSCBS20211534 |
| No. | Description                                                                 | Value  |
|-----|-----------------------------------------------------------------------------|--------|
| 1   | Entrepreneurship Doctoral Foundation                                         | ZKX19018 |
| 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                                                             | X_None |
| 5   | Payment or honoraria for lectures, presentations, speakers bureaus,         | X_None |
|     | manuscript writing or educational events                                     |        |
| 6   | Payment for expert testimony                                                 | X_None |
| 7   | Support for attending meetings and/or travel                                 | X_None |
| 8   | Patents planned, issued or pending                                           | X_None |
| 9   | Participation on a Data Safety Monitoring Board or Advisory Board            | X_None |
| 10  | Leadership or fiduciary role in other board, society,                         | X_None |
| Question                                                                 | Response |
|-------------------------------------------------------------------------|----------|
| committee or advocacy group, paid or unpaid                              |          |
| 11 Stock or stock options                                                | _X_None |
| 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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_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: 5/8/2022
Your Name: Wenping Chen
Manuscript Title: Iodine-based Extracellular Volume for Evaluating Myocardial Status in Patients Who Received Percutaneous Coronary Intervention for Acute Myocardial Infarction by Using Dual-layer Spectral Detector CT: a Comparison Study with MR
Manuscript number (if known): QIMS-21-1103-R4

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|   |                                                                                                 | the Key Projects of Science and Technology of Jiangsu Province BE2019602to add additional rows. |
|   |                                                                                                 | the Science Fund for Distinguished Young Scholars in Jiangsu Province; the Innovation and JSSCBS20211534 |
| 1 | Entrepreneurship Doctoral Foundation |
| 2 | the Nanjing Medical Science and technique Development Foundation | ZKX19018 |
| 3 | the Nanjing Medical Science and technique Development Foundation | QRX17057 |
| 4 | China Postdoctoral Science Foundation | 2019M661804 |
| 5 | Jiangsu Province Postdoctoral Science Foundation | 2019k060 |

**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 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, | None |
| Committee or advocacy group, paid or unpaid |   |
|--------------------------------------------|--|
| Stock or stock options                      | **X** None |
| Receipt of equipment, materials, drugs, medical writing, gifts or other services | **X** None |
| Other financial or non-financial interests  | **X** None |

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**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: 5/8/2022
Your Name: Kejie Yin
Manuscript Title: Iodine-based Extracellular Volume for Evaluating Myocardial Status in Patients Who Received Percutaneous Coronary Intervention for Acute Myocardial Infarction by Using Dual-layer Spectral Detector CT: a Comparison Study with MR
Manuscript number (if known): QIMS-21-1103-R4

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|   |                                                                                             | Natural Science Foundation of China 81870358                                      |
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| No. | Description                                                                 | Status |
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| 1   | Entrepreneurship Doctoral Foundation                                        |        |
|     | the Nanjing Medical Science and technique Development Foundation             | ZKX19018 |
|     | the Nanjing Medical Science and technique Development Foundation             | QRX17057 |
|     | China Postdoctoral Science Foundation                                       | 2019M661804 |
|     | Jiangsu Province Postdoctoral Science Foundation                             | 2019k060 |

**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  
___X___None

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  
___X___None

8 Patents planned, issued or pending  
___X___None

9 Participation on a Data Safety Monitoring Board or Advisory Board  
___X___None

10 Leadership or fiduciary role in other board, society,  
___X___None
|                         |            |
|-------------------------|------------|
| committee or advocacy   |            |
| group, paid or unpaid   |            |
| 11                      | Stock or   |
|                          | stock      |
|                          | options    |
|                          | __X__None  |
| 12                      | Receipt of |
|                          | equipment,|
|                          | materials,|
|                          | drugs,    |
|                          | medical   |
|                          | writing,  |
|                          | gifts or  |
|                          | other     |
|                          | services  |
|                          | __X__None  |
| 13                      | Other      |
|                          | financial |
|                          | interests |
|                          | __X__None  |

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ICMJE DISCLOSURE FORM

Date: 5/8/2022
Your Name: Xiaobiao Chen
Manuscript Title: Iodine-based Extracellular Volume for Evaluating Myocardial Status in Patients Who Received Percutaneous Coronary Intervention for Acute Myocardial Infarction by Using Dual-layer Spectral Detector CT: a Comparison Study with MR
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Time frame: Since the initial planning of the work
| No. | Description                                                                 | Status |
|-----|-----------------------------------------------------------------------------|--------|
| 1   | Entrepreneurship Doctoral Foundation                                        |        |
|     | the Nanjing Medical Science and technique Development Foundation             | ZXX19018 |
| 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 lectures, presentations, speakers bureaus,         | ☑ None |
|     | manuscript writing or educational events                                     |        |
| 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,                        | ☑ None |

**Time frame: past 36 months**
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| Stock or stock options | None |
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ICMJE DISCLOSURE FORM

Date: 5/8/2022
Your Name: Zhihong Shen
Manuscript Title: Iodine-based Extracellular Volume for Evaluating Myocardial Status in Patients Who Received Percutaneous Coronary Intervention for Acute Myocardial Infarction by Using Dual-layer Spectral Detector CT: a Comparison Study with MR
Manuscript number (if known): QIMS-21-1103-R4

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| China Postdoctoral Science Foundation | 2019M661804 |
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| 4 | Consulting fees | _X_None |
| 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 | _X_None |
| 8 | Patents planned, issued or pending | _X_None |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board | _X_None |
| 10 | Leadership or fiduciary role in other board, society, | _X_None |
| Question                                                                 | Answer |
|------------------------------------------------------------------------|--------|
| 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   |

Please summarize the above conflict of interest in the following box:

This work was supported by the Natural Science Foundation of China (grant numbers: 92068116, 81870358); the Key Projects of Science and Technology of Jiangsu Province (grant number: BE2019602); the Science Fund for Distinguished Young Scholars in Jiangsu Province; the Innovation and Entrepreneurship Doctoral Foundation (grant number: JSSCBS20211534); the Nanjing Medical Science and technique Development Foundation (grant numbers: ZKKX19018, QRX17057); China Postdoctoral Science Foundation (grant number: 2019M661804) and Jiangsu Province Postdoctoral Science Foundation (grant number: 2019k060).

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: 5/8/2022
Your Name: Xin Zhang
Manuscript Title: Iodine-based Extracellular Volume for Evaluating Myocardial Status in Patients Who Received Percutaneous Coronary Intervention for Acute Myocardial Infarction by Using Dual-layer Spectral Detector CT: a Comparison Study with MR
Manuscript number (if known): QIMS-21-1103-R4

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 following questions apply to the author’s relationships/activities/interests as they relate to the current manuscript only.

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.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

|   | 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) |
|---|-----------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|
| 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. | Natural Science Foundation of China 92068116                                   |
|   |                                                                                               | Natural Science Foundation of China 81870358                                   |
|   |                                                                                               | the Key Projects of Science and Technology of Jiangsu Province BE2019602         |
|   |                                                                                               | the Innovation and Science Fund for Distinguished Young Scholars in Jiangsu Province; the JSSCBS20211534 |

Time frame: Since the initial planning of the work
| Grants or contracts from any entity (if not indicated in item #1 above). | None |
|---|---|
| Royalties or licenses | None |
| Consulting fees | None |
| Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events | None |
| Payment for expert testimony | None |
| Support for attending meetings and/or travel | None |
| Patents planned, issued or pending | None |
| Participation on a Data Safety Monitoring Board or Advisory Board | None |
| Leadership or fiduciary role in other board, society, | None |
| Committee or advocacy group, paid or unpaid |  |
|------------------------------------------|---|

11 Stock or stock options __X__ None

12 Receipt of equipment, materials, drugs, medical writing, gifts or other services __X__ None

13 Other financial or non-financial interests __X__ None

Please summarize the above conflict of interest in the following box:

This work was supported by the Natural Science Foundation of China (grant numbers: 92068116, 81870358); the Key Projects of Science and Technology of Jiangsu Province (grant number: BE2019602); the Science Fund for Distinguished Young Scholars in Jiangsu Province; the Innovation and Entrepreneurship Doctoral Foundation (grant number: JSSCBS20211534); the Nanjing Medical Science and technique Development Foundation (grant numbers: ZKX19018, QRX17057); China Postdoctoral Science Foundation (grant number: 2019M661804) and Jiangsu Province Postdoctoral Science Foundation (grant number: 2019k060).

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: 5/8/2022
Your Name: Dan Mu
Manuscript Title: Iodine-based Extracellular Volume for Evaluating Myocardial Status in Patients Who Received Percutaneous Coronary Intervention for Acute Myocardial Infarction by Using Dual-layer Spectral Detector CT: a Comparison Study with MR
Manuscript number (if known): QIMS-21-1103-R4

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. | Natural Science Foundation of China 92068116 |
| | | Natural Science Foundation of China 81870358 |
| | | the Key Projects of Science and Technology of Jiangsu Province BE2019602 to add additional rows. |
| | | the Science Fund for Distinguished Young Scholars in Jiangsu Province; the Innovation and JSSCBS20211534 |
| #  | Description                                                                 | Value       |
|----|-----------------------------------------------------------------------------|-------------|
| 1  | ZKX19018                                                                    |             |
| 2  | QRX17057                                                                    |             |
| 3  | China Postdoctoral Science Foundation                                         | 2019M661804 |
| 4  | Jiangsu Province Postdoctoral Science Foundation                             | 2019k060    |
| 5  | Grants or contracts from any entity (if not indicated in item #1 above)     | None        |
| 6  | Royalties or licenses                                                        | None        |
| 7  | Consulting fees                                                             | None        |
| 8  | Payment or honoraria for lectures, presentations, speakers bureaus,          | None        |
|    | manuscript writing or educational events                                     |             |
| 9  | Payment for expert testimony                                                 | None        |
| 10 | Support for attending meetings and/or travel                                 | None        |
| 11 | Patents planned, issued or pending                                           | None        |
| 12 | Participation on a Data Safety Monitoring Board or Advisory Board            | None        |
| 13 | Leadership or fiduciary role in other board, society,                         | None        |
|   | committee or advocacy group, paid or unpaid |   |
|---|--------------------------------------------|---|
|11| Stock or stock options | __X__ None |
|12| Receipt of equipment, materials, drugs, medical writing, gifts or other services | __X__ None |
|13| Other financial or non-financial interests | __X__ None |

Please summarize the above conflict of interest in the following box:

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This work was supported by the Natural Science Foundation of China (grant numbers: 92068116, 81870358); the Key Projects of Science and Technology of Jiangsu Province (grant number: BE2019602); the Science Fund for Distinguished Young Scholars in Jiangsu Province; the Innovation and Entrepreneurship Doctoral Foundation (grant number: JSSCBS20211534); the Nanjing Medical Science and technique Development Foundation (grant numbers: ZKX19018, QRX17057); China Postdoctoral Science Foundation (grant number: 2019M661804) and Jiangsu Province Postdoctoral Science Foundation (grant number: 2019k060).
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