ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Royalties: Funds are coming in to you or your institution due to your patent
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Taro

2. Surname (Last Name)  
   Sakamoto

3. Date  
   16-May-2020

4. Are you the corresponding author?  
   [ ] Yes  
   [ ] No

   Corresponding Author’s Name  
   Junya Fukuoka

5. Manuscript Title  
   A narrative review of digital pathology and artificial intelligence: Focusing on lung cancer

6. Manuscript Identifying Number (if you know it)  
   TLCR-20-591

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?  
   [ ] Yes  
   [ ] No

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   [ ] No

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Dr. Sakamoto has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 1. Identifying Information**

1. Given Name (First Name)  
   Tomoi

2. Surname (Last Name)  
   Furukawa

3. Date  
   13-May-2020

4. Are you the corresponding author?  
   Yes ✔ No

   Corresponding Author's Name  
   Junya Fukuoka

5. Manuscript Title  
   A narrative review of digital pathology and artificial intelligence: Focusing on lung cancer

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Dr. Furukawa has nothing to disclose.

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## Section 1. Identifying Information

1. Given Name (First Name)  
Kris

2. Surname (Last Name)  
Lami

3. Date  
13-May-2020

4. Are you the corresponding author?  
☑ No

Corresponding Author's Name  
Junya Fukuoka

5. Manuscript Title  
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6. Manuscript Identifying Number (if you know it)  
TLCR-20-591

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Dr. Lami has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Hoa
2. Surname (Last Name) Pham
3. Date 13-May-2020
4. Are you the corresponding author? ✔ No

Corresponding Author's Name
Junya Fukuoka

5. Manuscript Title
A narrative review of digital pathology and artificial intelligence: Focusing on lung cancer

6. Manuscript Identifying Number (if you know it)
TLCR-20-591

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Dr. Pham has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  Wataru
2. Surname (Last Name)   Uegami
3. Date   13-May-2020
4. Are you the corresponding author?  ☑ No

Corresponding Author's Name
Junya Fukuoka

5. Manuscript Title
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6. Manuscript Identifying Number (if you know it)
TLCR-20-591

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Dr. Uegami has nothing to disclose.

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Other: Anything not covered under the previous three boxes
Pending: The patent has been filed but not issued
Issued: The patent has been issued by the agency
Licensed: The patent has been licensed to an entity, whether earning royalties or not
Royalties: Funds are coming in to you or your institution due to your patent
## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

| 1. Given Name (First Name) | Kishio |
| 2. Surname (Last Name) | Kuroda |
| 3. Date | 13-May-2020 |

4. Are you the corresponding author? ☑ No  

| 5. Manuscript Title |
| A narrative review of digital pathology and artificial intelligence: Focusing on lung cancer |

| 6. Manuscript Identifying Number (if you know it) |
| TLCR-20-591 |

### Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? ☑ No

### Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to publication.

Are there any relevant conflicts of interest? ☑ No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☑ No
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

☐ Yes, the following relationships/conditions/circumstances are present (explain below):

☑ No other relationships/conditions/circumstances that present a potential conflict of interest

At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Kuroda has nothing to disclose.

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This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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Royalties: Funds are coming in to you or your institution due to your patent
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Masataka
2. Surname (Last Name) Kawai
3. Date 13-May-2020
4. Are you the corresponding author? No
5. Manuscript Title A narrative review of digital pathology and artificial intelligence: Focusing on lung cancer
6. Manuscript Identifying Number (if you know it) TLCR-20-591

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)? No

Are there any relevant conflicts of interest? No

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Are there any relevant conflicts of interest? No

Section 4. Intellectual Property -- Patents & Copyrights

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Kawai has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Hidenori

2. Surname (Last Name)  
   Sakanashi

3. Date  
   13-May-2020

4. Are you the corresponding author?  
   [ ] Yes  [ ] No

   Corresponding Author's Name
   Junya Fukuoka

5. Manuscript Title  
   A narrative review of digital pathology and artificial intelligence: Focusing on lung cancer

6. Manuscript Identifying Number (if you know it)  
   TLCR-20-591

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Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest?  
   [ ] Yes  [ ] No

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Are there any relevant conflicts of interest?  
   [ ] Yes  [ ] No

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Section 4. Intellectual Property -- Patents & Copyrights

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### Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Sakanashi has nothing to disclose.

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# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Section 1. Identifying Information

| 1. Given Name (First Name) | 2. Surname (Last Name) | 3. Date       |
|-----------------------------|------------------------|---------------|
| Lee                         | Cooper                 | 12-May-2020   |

4. Are you the corresponding author?  
   - Yes [✔]  
   - No  

5. Manuscript Title  
   A narrative review of digital pathology and artificial intelligence: Focusing on lung cancer

6. Manuscript Identifying Number (if you know it)  
   TLCR-20-591

## Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?  
Are there any relevant conflicts of interest?  
   - Yes [✔]  
   - No  

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

| Name of Institution/Company | Grant? | Personal Fees? | Non-Financial Support? | Other? | Comments |
|-----------------------------|--------|----------------|------------------------|--------|----------|
| US National Cancer Institute | ✔      |                |                        |        |          |

## Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to publication.  
Are there any relevant conflicts of interest?  
   - Yes [✔]  
   - No  

If yes, please fill out the appropriate information below.

| Name of Entity            | Grant? | Personal Fees? | Non-Financial Support? | Other? | Comments |
|---------------------------|--------|----------------|------------------------|--------|----------|
| Roche Tissue Diagnostics  | ✔      |                |                        |        |          |
| Konica Minolta            |        | ✔              |                        |        |          |
Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
☐ Yes  ☑ No

Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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Section 6. Disclosure Statement

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Dr. Cooper reports grants from US National Cancer Institute, during the conduct of the study; grants from Roche Tissue Diagnostics, personal fees from Konica Minolta, outside the submitted work.

Evaluation and Feedback

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Bychkov
### Section 1. Identifying Information

| 1. Given Name (First Name) | 2. Surname (Last Name) | 3. Date |
|----------------------------|------------------------|---------|
| Andrey                     | Bychkov                | 13-May-2020 |

4. Are you the corresponding author? [ ] Yes [ ] No

Corresponding Author's Name
Junya Fukuoka

5. Manuscript Title
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ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Bychkov has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Junya

2. Surname (Last Name)  
   Fukuoka

3. Date  
   21-May-2020

4. Are you the corresponding author?  
   Yes ✔  No

5. Manuscript Title  
   A narrative review of digital pathology and artificial intelligence: Focusing on lung cancer

6. Manuscript Identifying Number (if you know it)  
   TLCR-20-591

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Are there any relevant conflicts of interest?  
   Yes ✔  No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

| Name of Institution/Company                                  | Grant? | Personal Fees? | Non-Financial Support? | Other? | Comments                  |
|--------------------------------------------------------------|--------|----------------|------------------------|--------|---------------------------|
| NEDO (New Energy and Industrial Technology Development Organization) | ✔      |                |                        |        | Hold Stock                |
| PathPresenter                                               |        |                |                        |        |                           |
| ContextVision                                               |        |                |                        | ✔      | Advisory Board            |
| Sony                                                        |        |                |                        | ✔      | Research contract         |
| Future Corp                                                 |        |                |                        | ✔      | joint R and D             |

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☑ Yes  ☐ No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

| Patent? | Pending? | Issued? | Licensed? | Royalties? | Licensee? | Comments |
|---------|----------|---------|-----------|------------|-----------|----------|
| PCT/JP2020/000424 | ☑ | ☐ | ☐ | ☐ | ☐ | Method of obtaining grand truth |

**Section 5. Relationships not covered above**

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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**Section 6. Disclosure Statement**

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Fukuoka reports grants from NEDO(New Energy and Industrial Technology Development Organization), other from PathPresenter, other from ContextVision, other from Sony, other from Future Corp, during the conduct of the study; other from Pathology Institute Corp, other from N Lab Corp, outside the submitted work; In addition, Dr. Fukuoka has a patent PCT/JP2020/000424 pending.
Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.