ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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4. Intellectual Property.

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

5. Relationships not covered above.

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Entity: government agency, foundation, commercial sponsor, academic institution, etc.

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Non-Financial Support: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

Other: Anything not covered under the previous three boxes

Pending: The patent has been filed but not issued

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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)  
Hailong

2. Surname (Last Name)  
Shang

3. Date  
19-November-2020

4. Are you the corresponding author?  
☑ No

Corresponding Author’s Name  
Wei Xing; Hailin Shen

5. Manuscript Title  
A new solution model for cardiac medical image segmentation

6. Manuscript Identifying Number (if you know it)

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

Dr. Shang 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) | Shiwei |
|----------------------------|--------|
| 2. Surname (Last Name)     | Zhao   |
| 3. Date                    | 19-November-2020 |
| 4. Are you the corresponding author? | Yes [✓] No |
| 5. Manuscript Title        | A new solution model for cardiac medical image segmentation |
| 6. Manuscript Identifying Number (if you know it) | |

## Section 2. The Work Under Consideration for Publication

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

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

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? [✓] No
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Dr. Zhao has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Hongdi
2. Surname (Last Name) Du
3. Date 19-November-2020

4. Are you the corresponding author? ☐ Yes ☑ No
Corresponding Author’s Name Wei Xing; Hailin Shen

5. Manuscript Title
A new solution model for cardiac medical image segmentation

6. Manuscript Identifying Number (if you know it)

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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Are there any relevant conflicts of interest? ☐ Yes ☑ No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☐ Yes ☑ No
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Dr. Du has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  Jinggang
2. Surname (Last Name)  Zhang
3. Date  19-November-2020
4. Are you the corresponding author?  
   Yes  
   No  ✔

Corresponding Author’s Name
Wei Xing; Hailin Shen

5. Manuscript Title
A new solution model for cardiac medical image segmentation

6. Manuscript Identifying Number (if you know it)

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No  ✔

Section 4. Intellectual Property -- Patents & Copyrights

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No  ✔
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Dr. Zhang has nothing to disclose.

Evaluation and Feedback

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### Section 1. Identifying Information

1. **Given Name (First Name)**  
   Wei

2. **Surname (Last Name)**  
   Xing

3. **Date**  
   19-November-2020

4. Are you the corresponding author?  
   ✔ Yes  
   No

5. **Manuscript Title**  
   A new solution model for cardiac medical image segmentation

6. **Manuscript Identifying Number (if you know it)**

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- **Personal Fees:** Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations
- **Non-Financial Support:** Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.
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1. Given Name (First Name)  
   Hailin  

2. Surname (Last Name)  
   Shen  

3. Date  
   19-November-2020  

4. Are you the corresponding author?  
   ✔ Yes  
   □ No  

5. Manuscript Title  
   A new solution model for cardiac medical image segmentation  

6. Manuscript Identifying Number (if you know it)  

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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.)?  

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Dr. Shen has nothing to disclose.

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