Date:	2/17/2023
Your Name:	Chris Stinton
Manuscript Title:	Artificial intelligence software for analysing chest X-ray images to identify suspected lung cancer
Manuscript Number (if known):	135755
In the interest of transparency, w	e ask you to disclose all relationships/activities/interests listed below that are related to the

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.

		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	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.		Project No. NIHR135755, as part of funding for the Warwick Evidence TAR team Click the tab key to add additional rows.
2	Grants or contracts from any entity (if not indicated in item #1 above).	Time frame: past 36 months None	
3	Royalties or licenses	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)
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, 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:	2/20/2023
Your Name:	Emma Loveman
Manuscript Title:	Artificial intelligence software for analysing chest X-ray images to identify suspected lung cancer
Manuscript Number (if known):	135755

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.

		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 o	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.		Project No. NIHR135755, as part of funding for the Warwick Evidence TAR team, payment made from Warwick Evidence to Effective Evidence LLP 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	

		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)
4	Consulting fees	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	
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:	2/20/2023
Your Name:	Jill Colquitt
Manuscript Title:	Artificial intelligence software for analysing chest X-ray images to identify suspected lung cancer
Manuscript Number (if known):	135755

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.

		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 o	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.		Project No. NIHR135755, as part of funding for the Warwick Evidence TAR team, payment made from Warwick Evidence to Effective Evidence LLP 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 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)
4	Consulting fees	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	
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:			2/21/2023		
Your Name:			Janette Parr		
Manuscript Title:			Artificial intelligence software for analysing chest X-ray images to identify suspected lung cancer		
Mar	uscript Number (if k	known):	135755		
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 In item #1 below, report all suppo		ript. "Rela of the mar e in doubt os/activitie ension, you entioned	rt for the work reported in this manuscript without time limit. For all other items, the time		
	To the discussion of the	past 30			
			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)	
			Time frame: Since the initial planning	of the work	
	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for	I 1	vidence Synthesis Programme	Project No. NIHR135755, as part of funding for the Warwick Evidence TAR team Click the tab key to add additional rows.	
	this item.				
2	Grants or contracts from any entity (if not	I 1	Time frame: past 36 month one RC West Midlands	PhD Studentship No. R.MRPT.1110	
	indicated in item #1 above).				
3	Royalties or licenses	⊠ No	one		

		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)
4	Consulting fees	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	
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:	ate: 2/20/2023	
Your Name:	Mary Jordan	
Manuscript Title: Artificial intelligence software for analysing chest X-ray images to identify suspected lucancer		
Manuscript Number (if known):	135755	
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.		
In item #1 below, report all suppo frame for disclosure is the past 36	ort for the work reported in this manuscript without time limit. For all other items, the time months.	

Name all entities with whom you have this Specifications/Comments (e.g., if payments were made to you or to your institution) relationship or indicate none (add rows as needed) Time frame: Since the initial planning of the work All support for the None present manuscript (e.g., NIHR Evidence Synthesis Programme Project No. NIHR135755, as part of funding for funding, provision the Warwick Evidence TAR team of study materials, medical writing, Click the tab key to add additional rows article processing charges, etc.) No time limit for this item. Time frame: past 36 months Grants or \boxtimes None contracts from any entity (if not indicated in item #1 above). Royalties or \boxtimes None licenses

		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)
4	Consulting fees	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	
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:			2/20/2023		
Your Name:			Mubarak Patel		
Manuscript Title:			Artificial intelligence software for analysing chest X-ray images to identify suspected lung cancer		
Mar	nuscript Number (if k	nown):	135755		
content of your manuscript. "Rela affected by the content of the ma indicate a bias. If you are in double The author's relationships/activities		ipt. "Rela of the ma e in doub os/activiti	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.		
	medication is not me			acturers of antihypertensive medication, even if	
	em #1 below, report ne for disclosure is th		· · · · · · · · · · · · · · · · · · ·	vithout time limit. For all other items, the time	
			l entities with whom you have this ship 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.,	[N	one		
		NIHR E	vidence Synthesis Programme	Project No. NIHR135755, as part of funding for	
	funding, provision of study materials.	NIHR E	vidence Synthesis Programme	Project No. NIHR135755, as part of funding for the Warwick Evidence TAR team	
	of study materials, medical writing,	NIHR E	vidence Synthesis Programme	, ,	
	of study materials,	NIHR E	vidence Synthesis Programme	the Warwick Evidence TAR team	
	of study materials, medical writing, article processing charges, etc.) No time limit for	NIHR E	vidence Synthesis Programme Time frame: past 36 month	the Warwick Evidence TAR team Click the tab key to add additional rows.	
2	of study materials, medical writing, article processing charges, etc.) No time limit for this item. Grants or contracts from			the Warwick Evidence TAR team Click the tab key to add additional rows.	
2	of study materials, medical writing, article processing charges, etc.) No time limit for this item. Grants or contracts from any entity (if not indicated in item		Time frame: past 36 month	the Warwick Evidence TAR team Click the tab key to add additional rows.	
2	of study materials, medical writing, article processing charges, etc.) No time limit for this item. Grants or contracts from any entity (if not		Time frame: past 36 month	the Warwick Evidence TAR team Click the tab key to add additional rows.	
2	of study materials, medical writing, article processing charges, etc.) No time limit for this item. Grants or contracts from any entity (if not indicated in item	N	Time frame: past 36 month	the Warwick Evidence TAR team Click the tab key to add additional rows.	
	of study materials, medical writing, article processing charges, etc.) No time limit for this item. Grants or contracts from any entity (if not indicated in item #1 above). Royalties or	N	Time frame: past 36 month	the Warwick Evidence TAR team Click the tab key to add additional rows.	

		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)
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, 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 wo	rding of any of the questions on this form.

Date:	2/20/2023
Your Name:	Peter Auguste
Manuscript Title:	Artificial intelligence software for analysing chest X-ray images to identify suspected lung cancer
Manuscript Number (if known):	135755
content of your manuscript. "Rel affected by the content of the ma	re 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 anuscript. Disclosure represents a commitment to transparency and does not necessarily be about whether to list a relationship/activity/interest, it is preferable that you do so.
•	ies/interests should be defined broadly. For example, if your manuscript pertains to the ou should declare all relationships with manufacturers of antihypertensive medication, even if I in the manuscript.
In item #1 helevy report all suppo	ort for the work reported in this manuscript without time limit. For all other items, the time

		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	present manuscript (e.g., funding, provision	NIHR Evidence Synthesis Programme	Project No. NIHR135755, as part of funding for the Warwick Evidence TAR team
article processir charges, etc.)	medical writing, article processing charges, etc.) No time limit for		Click the tab key to add additional rows.
		Time frame: past 36 months	s
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	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)
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, 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.		

ICIVIJE DISCLOSURE FORIVI		
Date: 2/23/2023		
Your Name:	Rachel Court	
Manuscript Title:	Artificial intelligence software for analysing cancer	chest X-ray images to identify suspected lung
Manuscript Number (if known): 135755		
content of your manuscript affected by the content of t indicate a bias. If you are in The author's relationships/ epidemiology of hypertensit that medication is not men	support for the work reported in this manuscript w	ot-for-profit third parties whose interests may be not to transparency and does not necessarily /interest, it is preferable that you do so. example, if your manuscript pertains to the acturers of antihypertensive medication, even if
N	ame all entities with whom you have this	Specifications/Comments (e.g., if payments were

		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		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.	NIHR Evidence Synthesis Programme	Project No. NIHR135755, as part of funding for the Warwick Evidence TAR team Click the tab key to add additional rows.
		Time frame: past 36 months	S
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	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)
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, 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	
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:		2/20/2023	2/20/2023			
Your Name:		lman Ghosh	lman Ghosh			
Manuscript Title:		Artificial intelligence software for analysin cancer	Artificial intelligence software for analysing chest X-ray images to identify suspected lung cancer			
Ма	nuscript Number (if k	nown): _ 135755				
con affe ind The epic tha	etent of your manuscrice ted by the content of icate a bias. If you are author's relationship demiology of hyperter t medication is not me	ipt. "Related" means any relation with for-profit or rof the manuscript. Disclosure represents a commitme in doubt about whether to list a relationship/activites/s/activities/interests should be defined broadly. For insion, you should declare all relationships with manuscript. all support for the work reported in this manuscript were	t for the work reported in this manuscript without time limit. For all other items, the time			
		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)			
			made to you or to your institution)			
1	All support for the present	relationship or indicate none (add rows as needed)	made to you or to your institution)			
1	All support for the present manuscript (e.g., funding, provision	relationship or indicate none (add rows as needed) Time frame: Since the initial planning	made to you or to your institution)			
1	All support for the present manuscript (e.g.,	relationship or indicate none (add rows as needed) Time frame: Since the initial planning None	made to you or to your institution) of the work Project No. NIHR135755, as part of funding for			
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing	relationship or indicate none (add rows as needed) Time frame: Since the initial planning None	made to you or to your institution) of the work Project No. NIHR135755, as part of funding for the Warwick Evidence TAR team			
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing,	relationship or indicate none (add rows as needed) Time frame: Since the initial planning None	made to you or to your institution) of the work Project No. NIHR135755, as part of funding for the Warwick Evidence TAR team			
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for	relationship or indicate none (add rows as needed) Time frame: Since the initial planning None	made to you or to your institution) of the work Project No. NIHR135755, as part of funding for the Warwick Evidence TAR team Click the tab key to add additional rows.			

any entity (if not indicated in item #1 above).

Royalties or

licenses

⊠ 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)
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, 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	
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.		