Dat	e:		7/22/2022			
Your Name:			Ying Jing			
Manuscript Title:			Prevalence and characteristics of adrenal tumors in an unselected screening population: A cross-sectional study			
Maı	nuscript Number (if l	known):	M22-1619			
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4	Consulting fees	None None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None None	
6	Payment for expert testimony	None None	
7	Support for attending meetings and/or travel	None None	
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Date:			7/19/2022			
Your Name:			Yue Wang	Yue Wang		
Manuscript Title:			Prevalence and characteristics of adrenal tu cross-sectional study	Prevalence and characteristics of adrenal tumors in an unselected screening population: A cross-sectional study		
Ma	nuscript Number (if k	(nown)	: <u>M22-1619</u>			
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13	Other financial or non-financial interests	None	
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Date:			7/19/2022			
Your Name:			Yue Sun			
Manuscript Title:			Prevalence and characteristics of adrenal tu cross-sectional study	Prevalence and characteristics of adrenal tumors in an unselected screening population: A cross-sectional study		
Mar	nuscript Number (if k	known)	: M22-1619			
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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non-financial interests	None	
Plea ⊠	•	e following statement to indicate your agreeme	

Date:			7/18/2022			
Your Name:			Zhixiao Luo			
Manuscript Title:			Prevalence and characteristics of adrenal tu cross-sectional study	Prevalence and characteristics of adrenal tumors in an unselected screening population: A cross-sectional study		
Mai	nuscript Number (if l	known	: <u>M22-1619</u>			
content of your manuscript. "Rela affected by the content of the mar indicate a bias. If you are in doubt The author's relationships/activitie epidemiology of hypertension, you that medication is not mentioned in			nanuscript. Disclosure represents a commitment ubt about whether to list a relationship/activity, ities/interests should be defined broadly. For expousing the manuscript wort for the work reported in this manuscript were supported to the manuscript with manuscript were supported to the manuscript with	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		
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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 None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None None	
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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 ⊠	•	e following statement to indicate your agreeme	

Dat	e:		7/18/2022			
Your Name:			Mingjun Zhang			
Manuscript Title:			Prevalence and characteristics of adrenal tu cross-sectional study	Prevalence and characteristics of adrenal tumors in an unselected screening population: A cross-sectional study		
Mai	nuscript Number (if k	(nown)	: M22-1619			
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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 None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None None	

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Dat	e:		7/19/2022			
Your Name:			Zhipeng Du			
Manuscript Title:			Prevalence and characteristics of adrenal tu cross-sectional study	Prevalence and characteristics of adrenal tumors in an unselected screening population: A cross-sectional study		
Mai	nuscript Number (if l	known)	: <u>M22-1619</u>			
In the interest of transparency, we ask yo content of your manuscript. "Related" maffected by the content of the manuscrip indicate a bias. If you are in doubt about The author's relationships/activities/interepidemiology of hypertension, you should that medication is not mentioned in the relationships.			nanuscript. Disclosure represents a commitmentable about whether to list a relationship/activity rities/interests should be defined broadly. For each you should declare all relationships with manufied in the manuscript.	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		
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Date:			7/18/2022			
Your Name:			Qifu Li			
Manuscript Title:			Prevalence and characteristics of adrenal tu cross-sectional study	Prevalence and characteristics of adrenal tumors in an unselected screening population: A cross-sectional study		
Ma	nuscript Number (if k	known)	: <u>M22-1619</u>			
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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
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3

Date:			7/22/2022		
Your Name:			Shumin Yang		
Manuscript Title:			Prevalence and characteristics of adrenal tumors in an unselected screening population: A cross-sectional study		
Ma	nuscript Number (if k	(nown):	M22-1619		
In the interest of transparency, we content of your manuscript. "Rela affected by the content of the maindicate a bias. If you are in doubt The author's relationships/activitie epidemiology of hypertension, you that medication is not mentioned			ted" means any relation with for-profit or no nuscript. Disclosure represents a commitme about whether to list a relationship/activity es/interests should be defined broadly. For easy a should declare all relationships with manufain the manuscript.	/interest, it is preferable that you do so.	
			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)	
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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non-financial interests	None	
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3

Date:	7/18/2022
Your Name:	Jinbo Hu
Manuscript Title:	The Prevalence and Characteristics of Adrenal Incidentalomas: A Prospective Study
Manuscript Number (if known):	M22-1619

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7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None None	
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Plea ⊠	•	e following statement to indicate your agreeme	

Dat	e:		7/19/2022			
Your Name:			Qingfeng Cheng			
Manuscript Title:			Prevalence and characteristics of adrenal tu cross-sectional study	Prevalence and characteristics of adrenal tumors in an unselected screening population: A cross-sectional study		
Mai	nuscript Number (if k	(nown)	: <u>M22-1619</u>			
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Plea ⊠	•	e following statement to indicate your agreeme	

Dat	e:		7/18/2022				
Your Name:			Linqiang Ma	Linqiang Ma			
Manuscript Title:			Prevalence and characteristics of adrenal tu cross-sectional study	Prevalence and characteristics of adrenal tumors in an unselected screening population: A cross-sectional study			
Mai	nuscript Number (if l	(nown)	: M22-1619				
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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)
4	Consulting fees	None 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 None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None None	

		e all entities with whom you have this ionship 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 ⊠	•	e following statement to indicate your agreeme	

Dat	e:		7/19/2022			
Your Name:			Zhihong Wang	Zhihong Wang		
Manuscript Title:			Prevalence and characteristics of adrenal tumors in an unselected screening population: A cross-sectional study			
Mai	nuscript Number (if l	(nown)	: <u>M22-1619</u>			
In the interest of transparency, we content of your manuscript. "Relat affected by the content of the man indicate a bias. If you are in doubt The author's relationships/activitie epidemiology of hypertension, you that medication is not mentioned in			nanuscript. Disclosure represents a commitmentable about whether to list a relationship/activity rities/interests should be defined broadly. For each you should declare all relationships with manufied in the manuscript.	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		
fran	ne for disclosure is th	ne past	36 months.			
			all entities with whom you have this onship 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		
			rime tramer entire the mittal planting	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.	Colle	None ection and assembly of data	Click the tab key to add additional rows.		
1	present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for		None	Click the tab key to add additional rows.		
2	present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for		None ection and assembly of data	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 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 None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None None	

			e all entities with whom you have this ionship 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: Certify that I have answered every question and have not altered the wording of any of the questions on this form.				

Date:	7/18/2022
Your Name:	Jun Yang
Manuscript Title:	The Prevalence and Characteristics of Adrenal Incidentalomas: A Prospective Study
Manuscript Number (if known):	M22-1619

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 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.

			ies with whom you indicate none (ad	n have this d 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.	None			Click the tab key to add additional rows.
			Time fr	ame: past 36 month	s
2	Grants or contracts from any entity (if not indicated in item #1 above).	None			
3	Royalties or licenses	None			

ľ		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 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	Voluntary lead of Consumer Engagement for the Primary Aldosteronism Foundation

1			
		Name all entities with whom you have this relationship or indicate none (add rows as need)	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 🖂	-	to the following statement to indicate your againswered every question and have not altered	reement: the wording of any of the questions on this form.

Date:			7/19/2022				
Your Name:			Ying Song				
Manuscript Title:			Prevalence and characteristics of adrenal tu cross-sectional study	Prevalence and characteristics of adrenal tumors in an unselected screening population: A cross-sectional study			
Mai	nuscript Number (if I	known	: <u>M22-1619</u>				
In the interest of transparency, we content of your manuscript. "Rela affected by the content of the mai indicate a bias. If you are in doubt The author's relationships/activities."			elated" means any relation with for-profit or no manuscript. Disclosure represents a commitme ubt about whether to list a relationship/activity rities/interests should be defined broadly. For e you should declare all relationships with manuf				
	ne for disclosure is th	•	•	iniout time limit. For all other items, the time			
			all entities with whom you have this onship 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			
			Б	or 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.	Coll	None ection and assembly of data	Click the tab key to add additional rows.			
1	present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for		None	Click the tab key to add additional rows.			
2	present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for		None ection and assembly of data	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 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 None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None None	

		e all entities with whom you have this ionship 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 ⊠	•	e following statement to indicate your agreeme	

Date:			7/19/2022				
Your Name:			Ting Luo	Ting Luo			
Manuscript Title:			Prevalence and characteristics of adrenal tu cross-sectional study	Prevalence and characteristics of adrenal tumors in an unselected screening population: A cross-sectional study			
Mai	nuscript Number (if k	(nown)	: <u>M22-1619</u>				
In the interest of transparency, we content of your manuscript. "Rela affected by the content of the maindicate a bias. If you are in doubt." The author's relationships/activitic epidemiology of hypertension, you that medication is not mentioned.			nanuscript. Disclosure represents a commitment of the commitment o	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			
			all entities with whom you have this onship 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.	Coll	None ection and assembly of data	Click the tab key to add additional rows.			
1	present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for			Click the tab key to add additional rows.			
2	present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for		ection and assembly of data	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 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 None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None None	

		e all entities with whom you have this ionship 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 ⊠	•	e following statement to indicate your agreeme	

Date:			7/18/2022				
Your Name:			Rong Luo				
Manuscript Title:			Prevalence and characteristics of adrenal tu cross-sectional study	Prevalence and characteristics of adrenal tumors in an unselected screening population: A cross-sectional study			
Mai	nuscript Number (if k	known	: <u>M22-1619</u>				
In the interest of transparency, we content of your manuscript. "Rela affected by the content of the maindicate a bias. If you are in doubt." The author's relationships/activitic epidemiology of hypertension, you that medication is not mentioned. In item #1 below, report all suppo			manuscript. Disclosure represents a commitme ubt about whether to list a relationship/activity vities/interests should be defined broadly. For eyou should declare all relationships with manuf	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			
			e all entities with whom you have this onship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)			
		reiau					
			Time frame: Since the initial planning				
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.	Adm	None sinistrative, technical, or logistic support	Click the tab key to add additional rows.			
1	present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for			Click the tab key to add additional rows.			
2	present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for		ninistrative, technical, or logistic support	Click the tab key to add additional rows.			

			cations/Comments (e.g., if payments were 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 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 None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None	

		e all entities with whom you have this ionship 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 ⊠	•	e following statement to indicate your agreeme	

3

Date	e:		7/19/2022			
Your Name:			Yi Yang			
Manuscript Title:			Prevalence and characteristics of adrenal tu cross-sectional study	Prevalence and characteristics of adrenal tumors in an unselected screening population: A cross-sectional study		
Mar	uscript Number (if k	known):	M22-1619			
In the interest of transparency, we content of your manuscript. "Rela affected by the content of the ma indicate a bias. If you are in doub? The author's relationships/activitie epidemiology of hypertension, you that medication is not mentioned. In item #1 below, report all suppo			elated" means any relation with for-profit or no lanuscript. Disclosure represents a commitmen bt about whether to list a relationship/activity ties/interests should be defined broadly. For e ou should declare all relationships with manuf	/interest, it is preferable that you do so. example, if your manuscript pertains to the acturers of antihypertensive medication, even if		
nun	ie for disclosure is tr	ic pust s	o montas.			
			all entities with whom you have this nship 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 this item.		None ction and assembly of data Time frame: past 36 month	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 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 None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None None	

		e all entities with whom you have this ionship 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 ⊠	•	e following statement to indicate your agreeme	

Date:			7/19/2022			
Your Name:			Yun Mao			
Manuscript Title:			Prevalence and characteristics of adrenal tu cross-sectional study	Prevalence and characteristics of adrenal tumors in an unselected screening population: A cross-sectional study		
Maı	nuscript Number (if k	(nown)	: <u>M22-1619</u>			
In the interest of transparency, we content of your manuscript. "Rela affected by the content of the maindicate a bias. If you are in doub." The author's relationships/activiti epidemiology of hypertension, yo that medication is not mentioned.			nanuscript. Disclosure represents a commitmentable about whether to list a relationship/activity rities/interests should be defined broadly. For each you should declare all relationships with manufied in the manuscript.	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		
fran	ne for disclosure is th	ie past	36 months.			
			all entities with whom you have this onship 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.		None inistrative, technical, or logistic support ection and assembly of data	Click the tab key to add additional rows.		
1	present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for	Adm	inistrative, technical, or logistic support			
2	present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for	Adm	inistrative, technical, or logistic support ection and assembly of data			

		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 None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None None	
6	Payment for expert testimony	None Non	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None None	

		e all entities with whom you have this ionship 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 ⊠	•	e following statement to indicate your agreeme	

Teertify that Thave answered every question and have not aftered the words

Date:			7/19/2022			
Your Name:			_ Li Zhong			
Manuscript Title:			Prevalence and characteristics of adrenal tu cross-sectional study	Prevalence and characteristics of adrenal tumors in an unselected screening population: A		
Mai	nuscript Number (if I	known)	: M22-1619			
con affe indi The epic that	tent of your manuscr cted by the content cate a bias. If you ar author's relationship demiology of hyperte medication is not m	ript. "R of the r e in do os/activension, ention	manuscript. Disclosure represents a commitme ubt about whether to list a relationship/activity vities/interests should be defined broadly. For e	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		
	ne for disclosure is th	-		tinout time limit. For all other items, the time		
			all entities with whom you have this onship 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		
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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.	Coll	None ection and assembly of data	Click the tab key to add additional rows.		
1	present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for		None	Click the tab key to add additional rows.		
2	present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for		None ection and assembly of data	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 None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None None	
6	Payment for expert testimony	None Non	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None None	

		e all entities with whom you have this ionship 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 ⊠	•	e following statement to indicate your agreeme	

Date:			7/18/2022			
Your Name:			Wenwen He			
Manuscript Title:			Prevalence and characteristics of adrenal tu cross-sectional study	Prevalence and characteristics of adrenal tumors in an unselected screening population: A cross-sectional study		
Mai	nuscript Number (if k	known)	: <u>M22-1619</u>			
con affe indi The epic that	tent of your manuscr cted by the content of cate a bias. If you are author's relationship demiology of hyperte medication is not m	ript. "R of the r e in do os/activension, ention	manuscript. Disclosure represents a commitme ubt about whether to list a relationship/activity vities/interests should be defined broadly. For each you should declare all relationships with manufied in the manuscript.	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		
	em #1 below, report ne for disclosure is th		port for the work reported in this manuscript w 36 months.	ithout time limit. For all other items, the time		
			all entities with whom you have this onship 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		
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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.	Colle	None ection and assembly of data	Click the tab key to add additional rows.		
1	present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for		None	Click the tab key to add additional rows.		
2	present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for		None ection and assembly of data	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 None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None None	
6	Payment for expert testimony	None Non	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None None	

			e all entities with whom you have this ionship 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: Certify that I have answered every question and have not altered the wording of any of the questions on this form.			

Date:			7/18/2022			
Your Name:			Fajin Lv			
Manuscript Title:			Prevalence and characteristics of adrenal tumors in an unselected screening population: A cross-sectional study			
Ma	nuscript Number (if l	(nown)	: M22-1619			
content of your manuscript. "Rela affected by the content of the ma indicate a bias. If you are in doub		ript. "R of the r e in doo os/activ	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. es/interests should be defined broadly. For example, if your manuscript pertains to the			
-	t medication is not m		The state of the s	acturers of antihypertensive medication, even if		
				rt for the work reported in this manuscript without time limit. For all other items, the time		
			all entities with whom you have this onship 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.	Conc	None eption and design	Click the tab key to add additional rows.		
1	present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for		None	Click the tab key to add additional rows.		
2	present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for		None eption and design	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 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 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 None	

			e all entities with whom you have this ionship 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: Certify that I have answered every question and have not altered the wording of any of the questions on this form.			

Date:			8/4/2022		
Your Name:			Zhengping Feng		
Manuscript Title:			Prevalence and characteristics of adrenal tumors in an unselected screening population: A cross-sectional study		
Mai	nuscript Number (if l	(nown)	: M22-1619		
In the interest of transparency, we content of your manuscript. "Rela affected by the content of the ma indicate a bias. If you are in doubted."		ript. "R of the n e in doo	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. es/interests should be defined broadly. For example, if your manuscript pertains to the		
-	demiology of hyperte t medication is not m		-	acturers of antihypertensive medication, even if	
			port for the work reported in this manuscript w 36 months.	ithout time limit. For all other items, the time	
			all entities with whom you have this onship 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	
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4	Consulting fees	None 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 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 None	

			e all entities with whom you have this ionship 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: Certify that I have answered every question and have not altered the wording of any of the questions on this form.			