julien emmanuel

Jul 22, 2021 13:06:17 EDT
American Society of Neuroradiology

Disclosure Purpose: Weekly disclosures

Disclosure Information:

1. **Are you the corresponding author?**

   No.

2. **What is the Manuscript Title?**

   feasability and added value of MR-DTI-tractography in the evaluation of short corpus callosum: premilinary results

3. **What is the Manuscript Identifying Number (if you know it)?**

4. **Please select which of the following apply to each relationship or activity:**

   You are not disclosing any interests to this organization.

5. **I confirm I have disclosed all direct support for the present manuscript (e.g. funding, provision of study materials, medical writing, article processing charges, etc.) There is no time limit for this item.**

   Yes

6. **Please indicate below whether in the past 36 months you have had any of the following interests that are topically related to the work reported in the manuscript.**

   a. **Employment (If you need to add an interest, return to the previous step and select "Employment")**

      No, I have no relevant interests of this type

   b. **Grants or contracts for research (If you need to add an interest, return to the previous step and select "Grant/Contract")**

      No, I have no relevant interests of this type

   c. **Payment for consulting (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   d. **Payments or honoraria for lectures, presentations, speakers bureaus, or educational events (If you need to add an interest, return to the previous step and select "Independent Contractor" and include the correct information under "Consultant")**

      No, I have no relevant interests of this type

   e. **Payment for service on an advisory board (If you need to add an interest, return to the previous step and select "Independent Contractor," and choose "Other")**

      No, I have no relevant interests of this type

   f. **Payment for participation Data and safety monitoring board (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   g. **Expert witness testimony (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   h. **Royalties from Patents, Trademarks, Copyrights or other intellectual property (If you need to add an interest, return to the previous step and select the appropriate interest type)**

      No, I have no relevant interests of this type

   i. **Patents planned, issued, or pending, whether or not you receive royalties (If you need to add an interest, return to the previous step and select "Patents")**

      No, I have no relevant interests of this type

   j. **Fiduciary Officer or Other Board Membership (If you need to add an interest, return to the previous step and select "Fiduciary Officer")**

      No, I have no relevant interests of this type

   k. **Stock or stock options (If you need to add an interest, return to the previous step and select the appropriate interest type)**

      No, I have no relevant interests of this type

   l. **Support for attending meetings or other travel (If you need to add an interest, return to the previous step and select "Travel")**

      No, I have no relevant interests of this type

   You are not disclosing any interests to this organization.

7. **Was any individual paid to provide professional writing assistance with this manuscript?**

   No.

8. **Have you or your institution received equipment, materials, drugs, or services in direct support of the work in the manuscript (without time limit) not disclosed above?**

   No.

9. **In the past 36 months, have you received equipment, materials, drugs, medical writing, gifts or other services from for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript not disclosed above?**

   No.

10. **Are there other financial or non-financial interests that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work not disclosed above.**

    No.

Certification

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Convey Global Disclosure System | AAMC

Bettina bessieres

Aug 31, 2021 09:04:33 EDT
American Society of Neuroradiology

Disclosure Purpose: Weekly disclosures

Disclosure Information:

1. **Are you the corresponding author?**

   No.

2. **What is the Manuscript Title?**

   Feasibility and added value of foetal MR-DTI-tractography in the evaluation of isolated short corpus callosum: preliminary results.

3. **What is the Manuscript Identifying Number (if you know it)?**

4. **Please select which of the following apply to each relationship or activity:**

   You are not disclosing any interests to this organization.

5. **I confirm I have disclosed all direct support for the present manuscript (e.g. funding, provision of study materials, medical writing, article processing charges, etc.) There is no time limit for this item.**

   Yes

6. **Please indicate below whether in the past 36 months you have had any of the following interests that are topically related to the work reported in the manuscript.**

   a. **Employment (If you need to add an interest, return to the previous step and select "Employment")**

      No, I have no relevant interests of this type

   b. **Grants or contracts for research (If you need to add an interest, return to the previous step and select "Grant/Contract")**

      No, I have no relevant interests of this type

   c. **Payment for consulting (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   d. **Payments or honoraria for lectures, presentations, speakers bureaus, or educational events (If you need to add an interest, return to the previous step and select "Independent Contractor" and include the correct information under "Consultant")**

      No, I have no relevant interests of this type

   e. **Payment for service on an advisory board (If you need to add an interest, return to the previous step and select "Independent Contractor," and choose "Other")**

      No, I have no relevant interests of this type

   f. **Payment for participation Data and safety monitoring board (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   g. **Expert witness testimony (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   h. **Royalties from Patents, Trademarks, Copyrights or other intellectual property (If you need to add an interest, return to the previous step and select the appropriate interest type)**

      No, I have no relevant interests of this type

   i. **Patents planned, issued, or pending, whether or not you receive royalties (If you need to add an interest, return to the previous step and select "Patents")**

      No, I have no relevant interests of this type

   j. **Fiduciary Officer or Other Board Membership (If you need to add an interest, return to the previous step and select "Fiduciary Officer")**

      No, I have no relevant interests of this type

   k. **Stock or stock options (If you need to add an interest, return to the previous step and select the appropriate interest type)**

      No, I have no relevant interests of this type

   l. **Support for attending meetings or other travel (If you need to add an interest, return to the previous step and select "Travel")**

      No, I have no relevant interests of this type

   You are not disclosing any interests to this organization.

7. **Was any individual paid to provide professional writing assistance with this manuscript?**

   No.

8. **Have you or your institution received equipment, materials, drugs, or services in direct support of the work in the manuscript (without time limit) not disclosed above?**

   No.

9. **In the past 36 months, have you received equipment, materials, drugs, medical writing, gifts or other services from for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript not disclosed above?**

   No.

10. **Are there other financial or non-financial interests that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work not disclosed above.**

    No.

Certification

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Convey Global Disclosure System | AAMC

Thibaud Quibel

Jul 22, 2021 03:06:05 EDT
American Society of Neuroradiology

Disclosure Purpose: Weekly disclosures

Disclosure Information:

1. **Are you the corresponding author?**

   No.

2. **What is the Manuscript Title?**

   Feasibility and added value of foetal MR-DTI-tractography in the evaluation of isolated short corpus callosum: preliminary results

3. **What is the Manuscript Identifying Number (if you know it)?**

4. **Please select which of the following apply to each relationship or activity:**

   You are not disclosing any interests to this organization.

5. **I confirm I have disclosed all direct support for the present manuscript (e.g. funding, provision of study materials, medical writing, article processing charges, etc.) There is no time limit for this item.**

   Yes

6. **Please indicate below whether in the past 36 months you have had any of the following interests that are topically related to the work reported in the manuscript.**

   a. **Employment (If you need to add an interest, return to the previous step and select "Employment")**

      No, I have no relevant interests of this type

   b. **Grants or contracts for research (If you need to add an interest, return to the previous step and select "Grant/Contract")**

      No, I have no relevant interests of this type

   c. **Payment for consulting (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   d. **Payments or honoraria for lectures, presentations, speakers bureaus, or educational events (If you need to add an interest, return to the previous step and select "Independent Contractor" and include the correct information under "Consultant")**

      No, I have no relevant interests of this type

   e. **Payment for service on an advisory board (If you need to add an interest, return to the previous step and select "Independent Contractor," and choose "Other")**

      No, I have no relevant interests of this type

   f. **Payment for participation Data and safety monitoring board (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   g. **Expert witness testimony (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   h. **Royalties from Patents, Trademarks, Copyrights or other intellectual property (If you need to add an interest, return to the previous step and select the appropriate interest type)**

      No, I have no relevant interests of this type

   i. **Patents planned, issued, or pending, whether or not you receive royalties (If you need to add an interest, return to the previous step and select "Patents")**

      No, I have no relevant interests of this type

   j. **Fiduciary Officer or Other Board Membership (If you need to add an interest, return to the previous step and select "Fiduciary Officer")**

      No, I have no relevant interests of this type

   k. **Stock or stock options (If you need to add an interest, return to the previous step and select the appropriate interest type)**

      No, I have no relevant interests of this type

   l. **Support for attending meetings or other travel (If you need to add an interest, return to the previous step and select "Travel")**

      No, I have no relevant interests of this type

   You are not disclosing any interests to this organization.

7. **Was any individual paid to provide professional writing assistance with this manuscript?**

   No.

8. **Have you or your institution received equipment, materials, drugs, or services in direct support of the work in the manuscript (without time limit) not disclosed above?**

   No.

9. **In the past 36 months, have you received equipment, materials, drugs, medical writing, gifts or other services from for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript not disclosed above?**

   No.

10. **Are there other financial or non-financial interests that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work not disclosed above.**

    No.

Certification

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Convey Global Disclosure System | AAMC

Anne-Elodie MILLISCHER

Jul 21, 2021 11:53:18 EDT
American Society of Neuroradiology

Disclosure Purpose: Weekly disclosures

Disclosure Information:

1. **Are you the corresponding author?**

   Yes.

2. **What is the Manuscript Title?**

   Feasibility and added value of foetal MR-DTI-tractography in the evaluation of isolated short corpus callosum: preliminary results

3. **What is the Manuscript Identifying Number (if you know it)?**

   Feasibility and added value of foetal MR-DTI-tractography in the evaluation of isolated short corpus callosum: preliminary results

4. **Please select which of the following apply to each relationship or activity:**

   You are not disclosing any interests to this organization.

5. **I confirm I have disclosed all direct support for the present manuscript (e.g. funding, provision of study materials, medical writing, article processing charges, etc.) There is no time limit for this item.**

   Yes

6. **Please indicate below whether in the past 36 months you have had any of the following interests that are topically related to the work reported in the manuscript.**

   a. **Employment (If you need to add an interest, return to the previous step and select "Employment")**

      No, I have no relevant interests of this type

   b. **Grants or contracts for research (If you need to add an interest, return to the previous step and select "Grant/Contract")**

      No, I have no relevant interests of this type

   c. **Payment for consulting (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   d. **Payments or honoraria for lectures, presentations, speakers bureaus, or educational events (If you need to add an interest, return to the previous step and select "Independent Contractor" and include the correct information under "Consultant")**

      No, I have no relevant interests of this type

   e. **Payment for service on an advisory board (If you need to add an interest, return to the previous step and select "Independent Contractor," and choose "Other")**

      No, I have no relevant interests of this type

   f. **Payment for participation Data and safety monitoring board (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   g. **Expert witness testimony (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   h. **Royalties from Patents, Trademarks, Copyrights or other intellectual property (If you need to add an interest, return to the previous step and select the appropriate interest type)**

      No, I have no relevant interests of this type

   i. **Patents planned, issued, or pending, whether or not you receive royalties (If you need to add an interest, return to the previous step and select "Patents")**

      No, I have no relevant interests of this type

   j. **Fiduciary Officer or Other Board Membership (If you need to add an interest, return to the previous step and select "Fiduciary Officer")**

      No, I have no relevant interests of this type

   k. **Stock or stock options (If you need to add an interest, return to the previous step and select the appropriate interest type)**

      No, I have no relevant interests of this type

   l. **Support for attending meetings or other travel (If you need to add an interest, return to the previous step and select "Travel")**

      No, I have no relevant interests of this type

   You are not disclosing any interests to this organization.

7. **Was any individual paid to provide professional writing assistance with this manuscript?**

   No.

8. **Have you or your institution received equipment, materials, drugs, or services in direct support of the work in the manuscript (without time limit) not disclosed above?**

   No.

9. **In the past 36 months, have you received equipment, materials, drugs, medical writing, gifts or other services from for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript not disclosed above?**

   No.

10. **Are there other financial or non-financial interests that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work not disclosed above.**

    No.

Certification

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Convey Global Disclosure System | AAMC

Laurent SALOMON

Aug 05, 2021 05:54:20 EDT
American Society of Neuroradiology

Disclosure Purpose: Weekly disclosures

Disclosure Information:

1. **Are you the corresponding author?**

   No.

2. **What is the Manuscript Title?**

   Feasibility and added value of foetal MR-DTI-tractography in the evaluation of isolated short corpus callosum: preliminary results

3. **What is the Manuscript Identifying Number (if you know it)?**

4. **Please select which of the following apply to each relationship or activity:**

   You are not disclosing any interests to this organization.

5. **I confirm I have disclosed all direct support for the present manuscript (e.g. funding, provision of study materials, medical writing, article processing charges, etc.) There is no time limit for this item.**

   Yes

6. **Please indicate below whether in the past 36 months you have had any of the following interests that are topically related to the work reported in the manuscript.**

   a. **Employment (If you need to add an interest, return to the previous step and select "Employment")**

      No, I have no relevant interests of this type

   b. **Grants or contracts for research (If you need to add an interest, return to the previous step and select "Grant/Contract")**

      No, I have no relevant interests of this type

   c. **Payment for consulting (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   d. **Payments or honoraria for lectures, presentations, speakers bureaus, or educational events (If you need to add an interest, return to the previous step and select "Independent Contractor" and include the correct information under "Consultant")**

      No, I have no relevant interests of this type

   e. **Payment for service on an advisory board (If you need to add an interest, return to the previous step and select "Independent Contractor," and choose "Other")**

      No, I have no relevant interests of this type

   f. **Payment for participation Data and safety monitoring board (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   g. **Expert witness testimony (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   h. **Royalties from Patents, Trademarks, Copyrights or other intellectual property (If you need to add an interest, return to the previous step and select the appropriate interest type)**

      No, I have no relevant interests of this type

   i. **Patents planned, issued, or pending, whether or not you receive royalties (If you need to add an interest, return to the previous step and select "Patents")**

      No, I have no relevant interests of this type

   j. **Fiduciary Officer or Other Board Membership (If you need to add an interest, return to the previous step and select "Fiduciary Officer")**

      No, I have no relevant interests of this type

   k. **Stock or stock options (If you need to add an interest, return to the previous step and select the appropriate interest type)**

      No, I have no relevant interests of this type

   l. **Support for attending meetings or other travel (If you need to add an interest, return to the previous step and select "Travel")**

      No, I have no relevant interests of this type

   You are not disclosing any interests to this organization.

7. **Was any individual paid to provide professional writing assistance with this manuscript?**

   No.

8. **Have you or your institution received equipment, materials, drugs, or services in direct support of the work in the manuscript (without time limit) not disclosed above?**

   No.

9. **In the past 36 months, have you received equipment, materials, drugs, medical writing, gifts or other services from for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript not disclosed above?**

   No.

10. **Are there other financial or non-financial interests that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work not disclosed above.**

    No.

Certification

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Convey Global Disclosure System | AAMC

Marie Laure MOUTARD

Sep 21, 2021 09:01:19 EDT
American Society of Neuroradiology

Disclosure Purpose: Weekly disclosures

Disclosure Information:

1. **Are you the corresponding author?**

   Yes.

2. **What is the Manuscript Title?**

   Feasibility and added value of foetal MR-DTI-tractography in the evaluation of isolated short corpus callosum: preliminary results

3. **What is the Manuscript Identifying Number (if you know it)?**

   AJNR-21-00635.R1

4. **Please select which of the following apply to each relationship or activity:**

   You are not disclosing any interests to this organization.

5. **I confirm I have disclosed all direct support for the present manuscript (e.g. funding, provision of study materials, medical writing, article processing charges, etc.) There is no time limit for this item.**

   Yes

6. **Please indicate below whether in the past 36 months you have had any of the following interests that are topically related to the work reported in the manuscript.**

   a. **Employment (If you need to add an interest, return to the previous step and select "Employment")**

      No, I have no relevant interests of this type

   b. **Grants or contracts for research (If you need to add an interest, return to the previous step and select "Grant/Contract")**

      No, I have no relevant interests of this type

   c. **Payment for consulting (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   d. **Payments or honoraria for lectures, presentations, speakers bureaus, or educational events (If you need to add an interest, return to the previous step and select "Independent Contractor" and include the correct information under "Consultant")**

      No, I have no relevant interests of this type

   e. **Payment for service on an advisory board (If you need to add an interest, return to the previous step and select "Independent Contractor," and choose "Other")**

      No, I have no relevant interests of this type

   f. **Payment for participation Data and safety monitoring board (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   g. **Expert witness testimony (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   h. **Royalties from Patents, Trademarks, Copyrights or other intellectual property (If you need to add an interest, return to the previous step and select the appropriate interest type)**

      No, I have no relevant interests of this type

   i. **Patents planned, issued, or pending, whether or not you receive royalties (If you need to add an interest, return to the previous step and select "Patents")**

      No, I have no relevant interests of this type

   j. **Fiduciary Officer or Other Board Membership (If you need to add an interest, return to the previous step and select "Fiduciary Officer")**

      No, I have no relevant interests of this type

   k. **Stock or stock options (If you need to add an interest, return to the previous step and select the appropriate interest type)**

      No, I have no relevant interests of this type

   l. **Support for attending meetings or other travel (If you need to add an interest, return to the previous step and select "Travel")**

      No, I have no relevant interests of this type

   You are not disclosing any interests to this organization.

7. **Was any individual paid to provide professional writing assistance with this manuscript?**

   No.

8. **Have you or your institution received equipment, materials, drugs, or services in direct support of the work in the manuscript (without time limit) not disclosed above?**

   No.

9. **In the past 36 months, have you received equipment, materials, drugs, medical writing, gifts or other services from for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript not disclosed above?**

   No.

10. **Are there other financial or non-financial interests that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work not disclosed above.**

    No.

Certification

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Convey Global Disclosure System | AAMC

Pascale SONIGO

Jul 28, 2021 11:13:33 EDT
American Society of Neuroradiology

Disclosure Purpose: Weekly disclosures

Disclosure Information:

1. **Are you the corresponding author?**

   No.

2. **What is the Manuscript Title?**

   Feasibility and added value of foetal MR-DTI-tractography in the evaluation of isolated short corpus callosum: preliminary results

3. **What is the Manuscript Identifying Number (if you know it)?**

4. **Please select which of the following apply to each relationship or activity:**

   You are not disclosing any interests to this organization.

5. **I confirm I have disclosed all direct support for the present manuscript (e.g. funding, provision of study materials, medical writing, article processing charges, etc.) There is no time limit for this item.**

   Yes

6. **Please indicate below whether in the past 36 months you have had any of the following interests that are topically related to the work reported in the manuscript.**

   a. **Employment (If you need to add an interest, return to the previous step and select "Employment")**

      No, I have no relevant interests of this type

   b. **Grants or contracts for research (If you need to add an interest, return to the previous step and select "Grant/Contract")**

      No, I have no relevant interests of this type

   c. **Payment for consulting (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   d. **Payments or honoraria for lectures, presentations, speakers bureaus, or educational events (If you need to add an interest, return to the previous step and select "Independent Contractor" and include the correct information under "Consultant")**

      No, I have no relevant interests of this type

   e. **Payment for service on an advisory board (If you need to add an interest, return to the previous step and select "Independent Contractor," and choose "Other")**

      No, I have no relevant interests of this type

   f. **Payment for participation Data and safety monitoring board (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   g. **Expert witness testimony (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   h. **Royalties from Patents, Trademarks, Copyrights or other intellectual property (If you need to add an interest, return to the previous step and select the appropriate interest type)**

      No, I have no relevant interests of this type

   i. **Patents planned, issued, or pending, whether or not you receive royalties (If you need to add an interest, return to the previous step and select "Patents")**

      No, I have no relevant interests of this type

   j. **Fiduciary Officer or Other Board Membership (If you need to add an interest, return to the previous step and select "Fiduciary Officer")**

      No, I have no relevant interests of this type

   k. **Stock or stock options (If you need to add an interest, return to the previous step and select the appropriate interest type)**

      No, I have no relevant interests of this type

   l. **Support for attending meetings or other travel (If you need to add an interest, return to the previous step and select "Travel")**

      No, I have no relevant interests of this type

   You are not disclosing any interests to this organization.

7. **Was any individual paid to provide professional writing assistance with this manuscript?**

   No.

8. **Have you or your institution received equipment, materials, drugs, or services in direct support of the work in the manuscript (without time limit) not disclosed above?**

   No.

9. **In the past 36 months, have you received equipment, materials, drugs, medical writing, gifts or other services from for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript not disclosed above?**

   No.

10. **Are there other financial or non-financial interests that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work not disclosed above.**

    No.

Certification

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Convey Global Disclosure System | AAMC

sophie couderc

Jul 28, 2021 17:25:05 EDT
American Society of Neuroradiology

Disclosure Purpose: Weekly disclosures

Disclosure Information:

1. **Are you the corresponding author?**

   No.

2. **What is the Manuscript Title?**

   feasibility and added value of foetal MR-DTI-tractography in the evaluation of isolated short corpus callosum:preliminary results

3. **What is the Manuscript Identifying Number (if you know it)?**

4. **Please select which of the following apply to each relationship or activity:**

   You are not disclosing any interests to this organization.

5. **I confirm I have disclosed all direct support for the present manuscript (e.g. funding, provision of study materials, medical writing, article processing charges, etc.) There is no time limit for this item.**

   Yes

6. **Please indicate below whether in the past 36 months you have had any of the following interests that are topically related to the work reported in the manuscript.**

   a. **Employment (If you need to add an interest, return to the previous step and select "Employment")**

      No, I have no relevant interests of this type

   b. **Grants or contracts for research (If you need to add an interest, return to the previous step and select "Grant/Contract")**

      No, I have no relevant interests of this type

   c. **Payment for consulting (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   d. **Payments or honoraria for lectures, presentations, speakers bureaus, or educational events (If you need to add an interest, return to the previous step and select "Independent Contractor" and include the correct information under "Consultant")**

      No, I have no relevant interests of this type

   e. **Payment for service on an advisory board (If you need to add an interest, return to the previous step and select "Independent Contractor," and choose "Other")**

      No, I have no relevant interests of this type

   f. **Payment for participation Data and safety monitoring board (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   g. **Expert witness testimony (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   h. **Royalties from Patents, Trademarks, Copyrights or other intellectual property (If you need to add an interest, return to the previous step and select the appropriate interest type)**

      No, I have no relevant interests of this type

   i. **Patents planned, issued, or pending, whether or not you receive royalties (If you need to add an interest, return to the previous step and select "Patents")**

      No, I have no relevant interests of this type

   j. **Fiduciary Officer or Other Board Membership (If you need to add an interest, return to the previous step and select "Fiduciary Officer")**

      No, I have no relevant interests of this type

   k. **Stock or stock options (If you need to add an interest, return to the previous step and select the appropriate interest type)**

      No, I have no relevant interests of this type

   l. **Support for attending meetings or other travel (If you need to add an interest, return to the previous step and select "Travel")**

      No, I have no relevant interests of this type

   You are not disclosing any interests to this organization.

7. **Was any individual paid to provide professional writing assistance with this manuscript?**

   No.

8. **Have you or your institution received equipment, materials, drugs, or services in direct support of the work in the manuscript (without time limit) not disclosed above?**

   No.

9. **In the past 36 months, have you received equipment, materials, drugs, medical writing, gifts or other services from for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript not disclosed above?**

   No.

10. **Are there other financial or non-financial interests that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work not disclosed above.**

    No.

Certification

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Convey Global Disclosure System | AAMC

Jean Philippe BAULT

Aug 11, 2021 11:41:40 EDT
American Society of Neuroradiology

Disclosure Purpose: Weekly disclosures

Disclosure Information:

1. **Are you the corresponding author?**

   No.

2. **What is the Manuscript Title?**

   Feasibility and added value of foetal MR-DTI-tractography in the evaluation of isolated short corpus callosum: preliminary results.

3. **What is the Manuscript Identifying Number (if you know it)?**

4. **Please select which of the following apply to each relationship or activity:**

   You are not disclosing any interests to this organization.

5. **I confirm I have disclosed all direct support for the present manuscript (e.g. funding, provision of study materials, medical writing, article processing charges, etc.) There is no time limit for this item.**

   Yes

6. **Please indicate below whether in the past 36 months you have had any of the following interests that are topically related to the work reported in the manuscript.**

   a. **Employment (If you need to add an interest, return to the previous step and select "Employment")**

      No, I have no relevant interests of this type

   b. **Grants or contracts for research (If you need to add an interest, return to the previous step and select "Grant/Contract")**

      No, I have no relevant interests of this type

   c. **Payment for consulting (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   d. **Payments or honoraria for lectures, presentations, speakers bureaus, or educational events (If you need to add an interest, return to the previous step and select "Independent Contractor" and include the correct information under "Consultant")**

      No, I have no relevant interests of this type

   e. **Payment for service on an advisory board (If you need to add an interest, return to the previous step and select "Independent Contractor," and choose "Other")**

      No, I have no relevant interests of this type

   f. **Payment for participation Data and safety monitoring board (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   g. **Expert witness testimony (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   h. **Royalties from Patents, Trademarks, Copyrights or other intellectual property (If you need to add an interest, return to the previous step and select the appropriate interest type)**

      No, I have no relevant interests of this type

   i. **Patents planned, issued, or pending, whether or not you receive royalties (If you need to add an interest, return to the previous step and select "Patents")**

      No, I have no relevant interests of this type

   j. **Fiduciary Officer or Other Board Membership (If you need to add an interest, return to the previous step and select "Fiduciary Officer")**

      No, I have no relevant interests of this type

   k. **Stock or stock options (If you need to add an interest, return to the previous step and select the appropriate interest type)**

      No, I have no relevant interests of this type

   l. **Support for attending meetings or other travel (If you need to add an interest, return to the previous step and select "Travel")**

      No, I have no relevant interests of this type

   You are not disclosing any interests to this organization.

7. **Was any individual paid to provide professional writing assistance with this manuscript?**

   No.

8. **Have you or your institution received equipment, materials, drugs, or services in direct support of the work in the manuscript (without time limit) not disclosed above?**

   No.

9. **In the past 36 months, have you received equipment, materials, drugs, medical writing, gifts or other services from for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript not disclosed above?**

   No.

10. **Are there other financial or non-financial interests that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work not disclosed above.**

    No.

Certification

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Convey Global Disclosure System | AAMC

David GREVENT

Sep 22, 2021 10:38:55 EDT
American Society of Neuroradiology

Disclosure Purpose: Weekly disclosures

Disclosure Information:

1. **Are you the corresponding author?**

   No.

2. **What is the Manuscript Title?**

   Feasibility and added value of foetal MR-DTI-tractography in the evaluation of isolated short corpus callosum: preliminary results

3. **What is the Manuscript Identifying Number (if you know it)?**

4. **Please select which of the following apply to each relationship or activity:**

   You are not disclosing any interests to this organization.

5. **I confirm I have disclosed all direct support for the present manuscript (e.g. funding, provision of study materials, medical writing, article processing charges, etc.) There is no time limit for this item.**

   Yes

6. **Please indicate below whether in the past 36 months you have had any of the following interests that are topically related to the work reported in the manuscript.**

   a. **Employment (If you need to add an interest, return to the previous step and select "Employment")**

      No, I have no relevant interests of this type

   b. **Grants or contracts for research (If you need to add an interest, return to the previous step and select "Grant/Contract")**

      No, I have no relevant interests of this type

   c. **Payment for consulting (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   d. **Payments or honoraria for lectures, presentations, speakers bureaus, or educational events (If you need to add an interest, return to the previous step and select "Independent Contractor" and include the correct information under "Consultant")**

      No, I have no relevant interests of this type

   e. **Payment for service on an advisory board (If you need to add an interest, return to the previous step and select "Independent Contractor," and choose "Other")**

      No, I have no relevant interests of this type

   f. **Payment for participation Data and safety monitoring board (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   g. **Expert witness testimony (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   h. **Royalties from Patents, Trademarks, Copyrights or other intellectual property (If you need to add an interest, return to the previous step and select the appropriate interest type)**

      No, I have no relevant interests of this type

   i. **Patents planned, issued, or pending, whether or not you receive royalties (If you need to add an interest, return to the previous step and select "Patents")**

      No, I have no relevant interests of this type

   j. **Fiduciary Officer or Other Board Membership (If you need to add an interest, return to the previous step and select "Fiduciary Officer")**

      No, I have no relevant interests of this type

   k. **Stock or stock options (If you need to add an interest, return to the previous step and select the appropriate interest type)**

      No, I have no relevant interests of this type

   l. **Support for attending meetings or other travel (If you need to add an interest, return to the previous step and select "Travel")**

      No, I have no relevant interests of this type

   You are not disclosing any interests to this organization.

7. **Was any individual paid to provide professional writing assistance with this manuscript?**

   No.

8. **Have you or your institution received equipment, materials, drugs, or services in direct support of the work in the manuscript (without time limit) not disclosed above?**

   No.

9. **In the past 36 months, have you received equipment, materials, drugs, medical writing, gifts or other services from for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript not disclosed above?**

   No.

10. **Are there other financial or non-financial interests that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work not disclosed above.**

    No.

Certification

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Convey Global Disclosure System | AAMC

Houman Mahallati

Jul 21, 2021 18:33:21 EDT
American Society of Neuroradiology

Disclosure Purpose: Weekly disclosures

Disclosure Information:

1. **Are you the corresponding author?**

   No.

2. **What is the Manuscript Title?**

   Feasibility and added value of foetal MR-DTI-tractography in the evaluation of isolated short corpus callosum: preliminary results

3. **What is the Manuscript Identifying Number (if you know it)?**

4. **Please select which of the following apply to each relationship or activity:**

   You are not disclosing any interests to this organization.

5. **I confirm I have disclosed all direct support for the present manuscript (e.g. funding, provision of study materials, medical writing, article processing charges, etc.) There is no time limit for this item.**

   Yes

6. **Please indicate below whether in the past 36 months you have had any of the following interests that are topically related to the work reported in the manuscript.**

   a. **Employment (If you need to add an interest, return to the previous step and select "Employment")**

      No, I have no relevant interests of this type

   b. **Grants or contracts for research (If you need to add an interest, return to the previous step and select "Grant/Contract")**

      No, I have no relevant interests of this type

   c. **Payment for consulting (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   d. **Payments or honoraria for lectures, presentations, speakers bureaus, or educational events (If you need to add an interest, return to the previous step and select "Independent Contractor" and include the correct information under "Consultant")**

      No, I have no relevant interests of this type

   e. **Payment for service on an advisory board (If you need to add an interest, return to the previous step and select "Independent Contractor," and choose "Other")**

      No, I have no relevant interests of this type

   f. **Payment for participation Data and safety monitoring board (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   g. **Expert witness testimony (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   h. **Royalties from Patents, Trademarks, Copyrights or other intellectual property (If you need to add an interest, return to the previous step and select the appropriate interest type)**

      No, I have no relevant interests of this type

   i. **Patents planned, issued, or pending, whether or not you receive royalties (If you need to add an interest, return to the previous step and select "Patents")**

      No, I have no relevant interests of this type

   j. **Fiduciary Officer or Other Board Membership (If you need to add an interest, return to the previous step and select "Fiduciary Officer")**

      No, I have no relevant interests of this type

   k. **Stock or stock options (If you need to add an interest, return to the previous step and select the appropriate interest type)**

      No, I have no relevant interests of this type

   l. **Support for attending meetings or other travel (If you need to add an interest, return to the previous step and select "Travel")**

      No, I have no relevant interests of this type

   You are not disclosing any interests to this organization.

7. **Was any individual paid to provide professional writing assistance with this manuscript?**

   No.

8. **Have you or your institution received equipment, materials, drugs, or services in direct support of the work in the manuscript (without time limit) not disclosed above?**

   No.

9. **In the past 36 months, have you received equipment, materials, drugs, medical writing, gifts or other services from for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript not disclosed above?**

   No.

10. **Are there other financial or non-financial interests that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work not disclosed above.**

    No.

Certification

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Convey Global Disclosure System | AAMC

desguerre isabelle

Jul 28, 2021 11:11:14 EDT
American Society of Neuroradiology

Disclosure Purpose: Weekly disclosures

Disclosure Information:

1. **Are you the corresponding author?**

   No.

2. **What is the Manuscript Title?**

   Feasibility and added value of foetal MR-DTI-tractography in the evaluation of isolated short corpus callosum: preliminary results

3. **What is the Manuscript Identifying Number (if you know it)?**

4. **Please select which of the following apply to each relationship or activity:**

   You are not disclosing any interests to this organization.

5. **I confirm I have disclosed all direct support for the present manuscript (e.g. funding, provision of study materials, medical writing, article processing charges, etc.) There is no time limit for this item.**

   Yes

6. **Please indicate below whether in the past 36 months you have had any of the following interests that are topically related to the work reported in the manuscript.**

   a. **Employment (If you need to add an interest, return to the previous step and select "Employment")**

      No, I have no relevant interests of this type

   b. **Grants or contracts for research (If you need to add an interest, return to the previous step and select "Grant/Contract")**

      No, I have no relevant interests of this type

   c. **Payment for consulting (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   d. **Payments or honoraria for lectures, presentations, speakers bureaus, or educational events (If you need to add an interest, return to the previous step and select "Independent Contractor" and include the correct information under "Consultant")**

      No, I have no relevant interests of this type

   e. **Payment for service on an advisory board (If you need to add an interest, return to the previous step and select "Independent Contractor," and choose "Other")**

      No, I have no relevant interests of this type

   f. **Payment for participation Data and safety monitoring board (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   g. **Expert witness testimony (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   h. **Royalties from Patents, Trademarks, Copyrights or other intellectual property (If you need to add an interest, return to the previous step and select the appropriate interest type)**

      No, I have no relevant interests of this type

   i. **Patents planned, issued, or pending, whether or not you receive royalties (If you need to add an interest, return to the previous step and select "Patents")**

      No, I have no relevant interests of this type

   j. **Fiduciary Officer or Other Board Membership (If you need to add an interest, return to the previous step and select "Fiduciary Officer")**

      No, I have no relevant interests of this type

   k. **Stock or stock options (If you need to add an interest, return to the previous step and select the appropriate interest type)**

      No, I have no relevant interests of this type

   l. **Support for attending meetings or other travel (If you need to add an interest, return to the previous step and select "Travel")**

      No, I have no relevant interests of this type

   You are not disclosing any interests to this organization.

7. **Was any individual paid to provide professional writing assistance with this manuscript?**

   No.

8. **Have you or your institution received equipment, materials, drugs, or services in direct support of the work in the manuscript (without time limit) not disclosed above?**

   No.

9. **In the past 36 months, have you received equipment, materials, drugs, medical writing, gifts or other services from for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript not disclosed above?**

   No.

10. **Are there other financial or non-financial interests that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work not disclosed above.**

    No.

Certification

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Convey Global Disclosure System | AAMC

Valerie Malan

Nov 04, 2021 04:18:41 EDT
American Society of Neuroradiology

Disclosure Purpose: Weekly disclosures

Disclosure Information:

1. **Are you the corresponding author?**

   No.

2. **What is the Manuscript Title?**

   Feasibility and added value of foetal MR-DTI-tractography in the evaluation of isolated short corpus callosum: preliminary results

3. **What is the Manuscript Identifying Number (if you know it)?**

   AJNR-21-00635.R1

4. **Please select which of the following apply to each relationship or activity:**

   You are not disclosing any interests to this organization.

5. **I confirm I have disclosed all direct support for the present manuscript (e.g. funding, provision of study materials, medical writing, article processing charges, etc.) There is no time limit for this item.**

   Yes

6. **Please indicate below whether in the past 36 months you have had any of the following interests that are topically related to the work reported in the manuscript.**

   a. **Employment (If you need to add an interest, return to the previous step and select "Employment")**

      No, I have no relevant interests of this type

   b. **Grants or contracts for research (If you need to add an interest, return to the previous step and select "Grant/Contract")**

      No, I have no relevant interests of this type

   c. **Payment for consulting (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   d. **Payments or honoraria for lectures, presentations, speakers bureaus, or educational events (If you need to add an interest, return to the previous step and select "Independent Contractor" and include the correct information under "Consultant")**

      No, I have no relevant interests of this type

   e. **Payment for service on an advisory board (If you need to add an interest, return to the previous step and select "Independent Contractor," and choose "Other")**

      No, I have no relevant interests of this type

   f. **Payment for participation Data and safety monitoring board (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   g. **Expert witness testimony (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   h. **Royalties from Patents, Trademarks, Copyrights or other intellectual property (If you need to add an interest, return to the previous step and select the appropriate interest type)**

      No, I have no relevant interests of this type

   i. **Patents planned, issued, or pending, whether or not you receive royalties (If you need to add an interest, return to the previous step and select "Patents")**

      No, I have no relevant interests of this type

   j. **Fiduciary Officer or Other Board Membership (If you need to add an interest, return to the previous step and select "Fiduciary Officer")**

      No, I have no relevant interests of this type

   k. **Stock or stock options (If you need to add an interest, return to the previous step and select the appropriate interest type)**

      No, I have no relevant interests of this type

   l. **Support for attending meetings or other travel (If you need to add an interest, return to the previous step and select "Travel")**

      No, I have no relevant interests of this type

   You are not disclosing any interests to this organization.

7. **Was any individual paid to provide professional writing assistance with this manuscript?**

   No.

8. **Have you or your institution received equipment, materials, drugs, or services in direct support of the work in the manuscript (without time limit) not disclosed above?**

   No.

9. **In the past 36 months, have you received equipment, materials, drugs, medical writing, gifts or other services from for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript not disclosed above?**

   No.

10. **Are there other financial or non-financial interests that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work not disclosed above.**

    No.

Certification

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Convey Global Disclosure System | AAMC

Nadia Bahi-Buisson

Nov 04, 2021 03:34:40 EDT
American Society of Neuroradiology

Disclosure Purpose: Weekly disclosures

Disclosure Information:

1. **Are you the corresponding author?**

   No.

2. **What is the Manuscript Title?**

   Feasibility and added value of foetal MR-DTI-tractography in the evaluation of isolated short corpus callosum: preliminary results

3. **What is the Manuscript Identifying Number (if you know it)?**

4. **Please select which of the following apply to each relationship or activity:**

   You are not disclosing any interests to this organization.

5. **I confirm I have disclosed all direct support for the present manuscript (e.g. funding, provision of study materials, medical writing, article processing charges, etc.) There is no time limit for this item.**

   Yes

6. **Please indicate below whether in the past 36 months you have had any of the following interests that are topically related to the work reported in the manuscript.**

   a. **Employment (If you need to add an interest, return to the previous step and select "Employment")**

      Yes, as disclosed above

   b. **Grants or contracts for research (If you need to add an interest, return to the previous step and select "Grant/Contract")**

      Yes, as disclosed above

   c. **Payment for consulting (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      Yes, as disclosed above

   d. **Payments or honoraria for lectures, presentations, speakers bureaus, or educational events (If you need to add an interest, return to the previous step and select "Independent Contractor" and include the correct information under "Consultant")**

      Yes, as disclosed above

   e. **Payment for service on an advisory board (If you need to add an interest, return to the previous step and select "Independent Contractor," and choose "Other")**

      Yes, as disclosed above

   f. **Payment for participation Data and safety monitoring board (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   g. **Expert witness testimony (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   h. **Royalties from Patents, Trademarks, Copyrights or other intellectual property (If you need to add an interest, return to the previous step and select the appropriate interest type)**

      No, I have no relevant interests of this type

   i. **Patents planned, issued, or pending, whether or not you receive royalties (If you need to add an interest, return to the previous step and select "Patents")**

      No, I have no relevant interests of this type

   j. **Fiduciary Officer or Other Board Membership (If you need to add an interest, return to the previous step and select "Fiduciary Officer")**

      No, I have no relevant interests of this type

   k. **Stock or stock options (If you need to add an interest, return to the previous step and select the appropriate interest type)**

      No, I have no relevant interests of this type

   l. **Support for attending meetings or other travel (If you need to add an interest, return to the previous step and select "Travel")**

      Yes, as disclosed above

   You are not disclosing any interests to this organization.

7. **Was any individual paid to provide professional writing assistance with this manuscript?**

   No.

8. **Have you or your institution received equipment, materials, drugs, or services in direct support of the work in the manuscript (without time limit) not disclosed above?**

   No.

9. **In the past 36 months, have you received equipment, materials, drugs, medical writing, gifts or other services from for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript not disclosed above?**

   No.

10. **Are there other financial or non-financial interests that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work not disclosed above.**

    No.

Certification

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Convey Global Disclosure System | AAMC

Tania Attie-Bitach

Nov 04, 2021 06:22:59 EDT
American Society of Neuroradiology

Disclosure Purpose: Weekly disclosures

Disclosure Information:

1. **Are you the corresponding author?**

   No.

2. **What is the Manuscript Title?**

   Feasibility and added value of foetal MR-DTI-tractography in the evaluation of isolated short corpus callosum: preliminary results

3. **What is the Manuscript Identifying Number (if you know it)?**

4. **Please select which of the following apply to each relationship or activity:**

   You are not disclosing any interests to this organization.

5. **I confirm I have disclosed all direct support for the present manuscript (e.g. funding, provision of study materials, medical writing, article processing charges, etc.) There is no time limit for this item.**

   Yes

6. **Please indicate below whether in the past 36 months you have had any of the following interests that are topically related to the work reported in the manuscript.**

   a. **Employment (If you need to add an interest, return to the previous step and select "Employment")**

      No, I have no relevant interests of this type

   b. **Grants or contracts for research (If you need to add an interest, return to the previous step and select "Grant/Contract")**

      No, I have no relevant interests of this type

   c. **Payment for consulting (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   d. **Payments or honoraria for lectures, presentations, speakers bureaus, or educational events (If you need to add an interest, return to the previous step and select "Independent Contractor" and include the correct information under "Consultant")**

      No, I have no relevant interests of this type

   e. **Payment for service on an advisory board (If you need to add an interest, return to the previous step and select "Independent Contractor," and choose "Other")**

      No, I have no relevant interests of this type

   f. **Payment for participation Data and safety monitoring board (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   g. **Expert witness testimony (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   h. **Royalties from Patents, Trademarks, Copyrights or other intellectual property (If you need to add an interest, return to the previous step and select the appropriate interest type)**

      No, I have no relevant interests of this type

   i. **Patents planned, issued, or pending, whether or not you receive royalties (If you need to add an interest, return to the previous step and select "Patents")**

      No, I have no relevant interests of this type

   j. **Fiduciary Officer or Other Board Membership (If you need to add an interest, return to the previous step and select "Fiduciary Officer")**

      No, I have no relevant interests of this type

   k. **Stock or stock options (If you need to add an interest, return to the previous step and select the appropriate interest type)**

      No, I have no relevant interests of this type

   l. **Support for attending meetings or other travel (If you need to add an interest, return to the previous step and select "Travel")**

      No, I have no relevant interests of this type

   You are not disclosing any interests to this organization.

7. **Was any individual paid to provide professional writing assistance with this manuscript?**

   No.

8. **Have you or your institution received equipment, materials, drugs, or services in direct support of the work in the manuscript (without time limit) not disclosed above?**

   No.

9. **In the past 36 months, have you received equipment, materials, drugs, medical writing, gifts or other services from for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript not disclosed above?**

   No.

10. **Are there other financial or non-financial interests that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work not disclosed above.**

    No.

Certification

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Convey Global Disclosure System | AAMC

Volodia Dangouloff-Ros

Jul 27, 2021 10:48:17 EDT
American Society of Neuroradiology

Disclosure Purpose: Weekly disclosures

Disclosure Information:

1. **Are you the corresponding author?**

   No.

2. **What is the Manuscript Title?**

   Feasibility and added value of foetal MR-DTI-tractography in the evaluation of isolated short corpus callosum: preliminary results

3. **What is the Manuscript Identifying Number (if you know it)?**

4. **Please select which of the following apply to each relationship or activity:**

   a. **Grant / Contract** GE Healthcare

      Neither

5. **I confirm I have disclosed all direct support for the present manuscript (e.g. funding, provision of study materials, medical writing, article processing charges, etc.) There is no time limit for this item.**

   Yes

6. **Please indicate below whether in the past 36 months you have had any of the following interests that are topically related to the work reported in the manuscript.**

   a. **Employment (If you need to add an interest, return to the previous step and select "Employment")**

      No, I have no relevant interests of this type

   b. **Grants or contracts for research (If you need to add an interest, return to the previous step and select "Grant/Contract")**

      No, I have no relevant interests of this type

   c. **Payment for consulting (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   d. **Payments or honoraria for lectures, presentations, speakers bureaus, or educational events (If you need to add an interest, return to the previous step and select "Independent Contractor" and include the correct information under "Consultant")**

      No, I have no relevant interests of this type

   e. **Payment for service on an advisory board (If you need to add an interest, return to the previous step and select "Independent Contractor," and choose "Other")**

      No, I have no relevant interests of this type

   f. **Payment for participation Data and safety monitoring board (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   g. **Expert witness testimony (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   h. **Royalties from Patents, Trademarks, Copyrights or other intellectual property (If you need to add an interest, return to the previous step and select the appropriate interest type)**

      No, I have no relevant interests of this type

   i. **Patents planned, issued, or pending, whether or not you receive royalties (If you need to add an interest, return to the previous step and select "Patents")**

      No, I have no relevant interests of this type

   j. **Fiduciary Officer or Other Board Membership (If you need to add an interest, return to the previous step and select "Fiduciary Officer")**

      No, I have no relevant interests of this type

   k. **Stock or stock options (If you need to add an interest, return to the previous step and select the appropriate interest type)**

      No, I have no relevant interests of this type

   l. **Support for attending meetings or other travel (If you need to add an interest, return to the previous step and select "Travel")**

      No, I have no relevant interests of this type

7. **Was any individual paid to provide professional writing assistance with this manuscript?**

   No.

8. **Have you or your institution received equipment, materials, drugs, or services in direct support of the work in the manuscript (without time limit) not disclosed above?**

   No.

9. **In the past 36 months, have you received equipment, materials, drugs, medical writing, gifts or other services from for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript not disclosed above?**

   No.

10. **Are there other financial or non-financial interests that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work not disclosed above.**

    No.

Certification

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Convey Global Disclosure System | AAMC

NATHALIE BODDAERT

Jul 21, 2021 11:31:39 EDT
American Society of Neuroradiology

Disclosure Purpose: Weekly disclosures

Disclosure Information:

1. **Are you the corresponding author?**

   No.

2. **What is the Manuscript Title?**

   Feasibility and added value of foetal MR-DTI-tractography in the evaluation of isolated short corpus callosum: preliminary results

3. **What is the Manuscript Identifying Number (if you know it)?**

4. **Please select which of the following apply to each relationship or activity:**

   You are not disclosing any interests to this organization.

5. **I confirm I have disclosed all direct support for the present manuscript (e.g. funding, provision of study materials, medical writing, article processing charges, etc.) There is no time limit for this item.**

   Yes

6. **Please indicate below whether in the past 36 months you have had any of the following interests that are topically related to the work reported in the manuscript.**

   a. **Employment (If you need to add an interest, return to the previous step and select "Employment")**

      No, I have no relevant interests of this type

   b. **Grants or contracts for research (If you need to add an interest, return to the previous step and select "Grant/Contract")**

      No, I have no relevant interests of this type

   c. **Payment for consulting (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   d. **Payments or honoraria for lectures, presentations, speakers bureaus, or educational events (If you need to add an interest, return to the previous step and select "Independent Contractor" and include the correct information under "Consultant")**

      No, I have no relevant interests of this type

   e. **Payment for service on an advisory board (If you need to add an interest, return to the previous step and select "Independent Contractor," and choose "Other")**

      No, I have no relevant interests of this type

   f. **Payment for participation Data and safety monitoring board (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   g. **Expert witness testimony (If you need to add an interest, return to the previous step and select "Independent Contractor")**

      No, I have no relevant interests of this type

   h. **Royalties from Patents, Trademarks, Copyrights or other intellectual property (If you need to add an interest, return to the previous step and select the appropriate interest type)**

      No, I have no relevant interests of this type

   i. **Patents planned, issued, or pending, whether or not you receive royalties (If you need to add an interest, return to the previous step and select "Patents")**

      No, I have no relevant interests of this type

   j. **Fiduciary Officer or Other Board Membership (If you need to add an interest, return to the previous step and select "Fiduciary Officer")**

      No, I have no relevant interests of this type

   k. **Stock or stock options (If you need to add an interest, return to the previous step and select the appropriate interest type)**

      No, I have no relevant interests of this type

   l. **Support for attending meetings or other travel (If you need to add an interest, return to the previous step and select "Travel")**

      No, I have no relevant interests of this type

   You are not disclosing any interests to this organization.

7. **Was any individual paid to provide professional writing assistance with this manuscript?**

   No.

8. **Have you or your institution received equipment, materials, drugs, or services in direct support of the work in the manuscript (without time limit) not disclosed above?**

   No.

9. **In the past 36 months, have you received equipment, materials, drugs, medical writing, gifts or other services from for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript not disclosed above?**

   No.

10. **Are there other financial or non-financial interests that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work not disclosed above.**

    No.

Certification

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Convey Global Disclosure System | AAMC