Sébastien Soize

Disclosure Purpose: AJNR Disclosures

Disclosure Information:

1. Are you the corresponding author?

No

2. What is the Manuscript Title?

Flow diversion for internal carotid artery aneurysms with compressive neuro-ophthalmologic symptoms: Predictors of morbidity, mortality and incomplete aneurysm occlusion

- 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")

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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)
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- 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

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

No

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



Daniel Kaiser

Disclosure Purpose: AJNR Disclosures

Disclosure Information:

1. Are you the corresponding author?

No

2. What is the Manuscript Title?

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- 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. Gift phenox Inc.
 - The relationship is outside the work reported in the manuscript but topically related and within the past 36 months
 - 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.

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No

- 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?

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



Christoph Kabbasch

Mar 07, 2022 11:46:09 EST American Society of Neuroradiology

Disclosure Purpose: AJNR Disclosures

Disclosure Information:

1. Are you the corresponding author?

No

2. What is the Manuscript Title?

Flow diversion for internal carotid artery aneurysms with compressive neuro-ophthalmologic symptoms: Predictors of morbidity, mortality and incomplete aneurysm occlusion

- 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. Independent Contractor Consultant Acandis

Neither

b. Independent Contractor - Consultant MicroVention, Inc.

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.

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- 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
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No

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



Volker Maus

Disclosure Purpose: AJNR Disclosures

Disclosure Information:

1. Are you the corresponding author?

No

2. What is the Manuscript Title?

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- 3. What is the Manuscript Identifying Number (if you know it)?
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No

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



Laurent Pierot

Mar 07, 2022 10:58:30 EST American Society of Neuroradiology

Disclosure Purpose: AJNR Disclosures

Disclosure Information:

1. Are you the corresponding author?

No

2. What is the Manuscript Title?

Flow diversion for internal carotid artery aneurysms with compressive neuro-ophthalmologic symptoms: Predictors of morbidity, mortality and incomplete aneurysm occlusion

- 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. Independent Contractor Consultant Balt
 - The relationship is outside the work reported in the manuscript but topically related and within the past 36 months
 - b. Independent Contractor Consultant MicroVention, Inc.
 - The relationship is outside the work reported in the manuscript but topically related and within the past 36 months
 - c. Independent Contractor Consultant phenox

The relationship is outside the work reported in the manuscript but topically related and within the past 36 months

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 - 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")

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- $7. \hspace{0.5cm} \text{Was any individual paid to provide professional writing assistance with this manuscript?}$
- 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.

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No.

Certification



Donald Lobsien

Disclosure Purpose: AJNR Disclosures

Disclosure Information:

1. Are you the corresponding author?

No

2. What is the Manuscript Title?

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No

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No.

Certification



Joachim Klisch

Disclosure Purpose: AJNR Disclosures

Disclosure Information:

1. Are you the corresponding author?

No

2. What is the Manuscript Title?

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- 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. Independent Contractor Other Microvention GmbH

Neither

b. Independent Contractor - Other Phenox GmbH

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No

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



Hanna Styczen

Disclosure Purpose: AJNR Disclosures

Disclosure Information:

1. Are you the corresponding author?

No

2. What is the Manuscript Title?

Flow diversion for internal carotid artery aneurysms with compressive neuro-ophthalmologic symptoms: Predictors of morbidity, mortality and incomplete aneurysm occlusion

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



kevin janot

Disclosure Purpose: AJNR Disclosures

Disclosure Information:

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No.

Certification



Ala Jamous

Disclosure Purpose: AJNR Disclosures

Disclosure Information:

1. Are you the corresponding author?

No

2. What is the Manuscript Title?

FLOW DIVERTER TREATMENT OF RUPTURED BASILAR ARTERY PERFORATOR ANEURYSMS: A MULTI-CENTER EXPERIENCE

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

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



Matthias Gawlitza

Disclosure Purpose: AJNR Disclosures

Disclosure Information:

1. Are you the corresponding author?

Yes

2. What is the Manuscript Title?

Flow diversion for internal carotid artery aneurysms with compressive neuro-ophthalmologic symptoms: Predictors of morbidity, mortality and incomplete aneurysm occlusion

- 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. Independent Contractor Other MicroVention, Inc.
 - The relationship is outside the work reported in the manuscript but topically related and within the past 36 months
 - b. Independent Contractor Consultant phenox Inc.
 - The relationship is outside the work reported in the manuscript but topically related and within the past 36 months
 - c. Gift phenox Inc.

The relationship is outside the work reported in the manuscript but topically related and within the past 36 months

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.
 - 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") 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") 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
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- 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
- 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
- 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

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



Sebastian Fscher

Mar 15, 2022 06:11:34 EDT American Society of Neuroradiology

Disclosure Purpose: AJNR Disclosures

Disclosure Information:

1. Are you the corresponding author?

No

2. What is the Manuscript Title?

Flow diversion for internal carotid artery aneurysms with compresive neuro-ophthalmologic symptoms: predictors for morbiity, mortality and incomplete aneurysm occlusion

- What is the Manuscript Identifying Number (if you know it)? nicht bekannt
- 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
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- 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
- 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.

 $7. \quad \mbox{Was any individual paid to provide professional writing assistance with this manuscript?}$

No

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No.
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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



Cornelius Deuschl

Mar 07, 2022 12:14:43 EST American Society of Neuroradiology

Disclosure Purpose: AJNR Disclosures

Disclosure Information:

1. Are you the corresponding author?

No

2. What is the Manuscript Title?

Flow diversion for internal carotid artery aneurysms with compressive neuro-ophthalmologic symptoms: Predictors of morbidity, mortality and incomplete aneurysm occlusion

- 3. What is the Manuscript Identifying Number (if you know it)?
- 4. Please select which of the following apply to each relationship or activity:

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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.
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No, I have no relevant interests of this type

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

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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")

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

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



Christophe Cognard

Disclosure Purpose: AJNR Disclosures

Disclosure Information:

1. Are you the corresponding author?

No

2. What is the Manuscript Title?

Flow diversion for internal carotid artery aneurysms with compressive neuro-ophthalmologic symptoms: Predictors of morbidity, mortality and incomplete aneurysm occlusion

- 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. Independent Contractor Consultant anaconda
 - The relationship is outside the work reported in the manuscript but topically related and within the past 36 months
 - Independent Contractor Consultant Johnson & Johnson Health Care Systems Inc.
 The relationship is outside the work reported in the manuscript but topically related and within the past 36 months
 - Independent Contractor Consultant MicroVention, Inc.
 The relationship is outside the work reported in the manuscript but topically related and within the past 36 months
 - d. Independent Contractor Consultant Stryker Corporation

The relationship is outside the work reported in the manuscript but topically related and within the past 36 months

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
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- 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
- I. 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?

Mar 08, 2022 05:34:24 EST American Society of Neuroradiology 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



Gregoire Boulouis

Mar 08, 2022 14:21:05 EST American Society of Neuroradiology

Disclosure Purpose: AJNR Disclosures

Disclosure Information:

1. Are you the corresponding author?

No

2. What is the Manuscript Title?

Parent artery straightening after flow-diverter stenting improves the odds of aneurysm occlusion

- What is the Manuscript Identifying Number (if you know it)?
 Unknown
- 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
- I. 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.

 $7. \quad \mbox{Was any individual paid to provide professional writing assistance with this manuscript?}$

No

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No.
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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



Guillaume Bellanger

Mar 29, 2022 07:39:45 EDT American Society of Neuroradiology

Disclosure Purpose: AJNR Disclosures

Disclosure Information:

1. Are you the corresponding author?

No

2. What is the Manuscript Title?

Flow diversion for internal carotid artery aneurysms with compressive neuro-ophthalmologic symptoms: Predictors of morbidity, mortality and incomplete aneurysm occlusion

- 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
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- 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
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- 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
- I. 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

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



Daniel Behme

Disclosure Purpose: AJNR Disclosures

Disclosure Information:

1. Are you the corresponding author?

No

2. What is the Manuscript Title?

FLOW DIVERTER TREATMENT OF RUPTURED BASILAR ARTERY PERFORATOR ANEURYSMS: A MULTI-CENTER EXPERIENCE

- 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. Independent Contractor Consultant ACANDIS
 - The relationship is outside the work reported in the manuscript but topically related and within the past 36 months
 - b. Independent Contractor Consultant Balt USA, LLC
 - The relationship is outside the work reported in the manuscript but topically related and within the past 36 months
 - Independent Contractor Consultant Penumbra, Inc.
 The relationship is outside the work reported in the manuscript but topically related and within the past 36 months
 - d. Independent Contractor Consultant PHENOX Neither
 - e. Independent Contractor Consultant Vesalio

The relationship is outside the work reported in the manuscript but topically related and within the past 36 months

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
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- 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
- I. 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



Nuran Abdullayev

Disclosure Purpose: AJNR Disclosures

Disclosure Information:

1. Are you the corresponding author?

No

2. What is the Manuscript Title?

Flow diversion for internal carotid artery aneurysms with compressive neuro-ophthalmologic symptoms: Predictors of morbidity, mortality and incomplete aneurysm occlusion

- 3. What is the Manuscript Identifying Number (if you know it)?
- 4. Please select which of the following apply to each relationship or activity:

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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.

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No, I have no relevant interests of this type

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

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

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

