Hrayr Attarian

Apr 11, 2022 10:28:45 EDT
American Society of Neuroradiology

Disclosure Purpose: AJNR Disclosures

#### Disclosure Information:

1. Are you the corresponding author?

Nο

2. What is the Manuscript Title?

Correlation of Call Burden and Sleep Deprivation with Physician Burnout, Driving Accidents, and Medical Errors Among United States Neurointerventionalists

- 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

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

3. 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

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



Donald Cantrell

Jul 26, 2022 12:13:03 EDT
American Society of Neuroradiology

Disclosure Purpose: AJNR Disclosures

#### Disclosure Information:

1. Are you the corresponding author?

Nο

2. What is the Manuscript Title?

Correlation of Call Burden and Sleep Deprivation with Physician Burnout, Driving Accidents, and Medical Errors Among United States Neurointerventionalists

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

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No, I have no relevant interests of this type

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No, I have no relevant interests of this type

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No

3. 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

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



Patti Curl

May 23, 2022 11:30:19 EDT
American Society of Neuroradiology

Disclosure Purpose: AJNR Disclosures

#### Disclosure Information:

1. Are you the corresponding author?

Nο

2. What is the Manuscript Title?

Correlation of Call Burden and Sleep Deprivation with Physician Burnout, Driving Accidents, and Medical Errors Among United States Neurointerventionalists

- 3. What is the Manuscript Identifying Number (if you know it)?
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No, I have no relevant interests of this type

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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")

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No, I have no relevant interests of this type

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No, I have no relevant interests of this type

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No, I have no relevant interests of this type

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No

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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



Phillip Daves

Apr 11, 2022 10:09:09 EDT
American Society of Neuroradiology

Disclosure Purpose: AJNR Disclosures

#### Disclosure Information:

1. Are you the corresponding author?

No.

2. What is the Manuscript Title?

, Correlation of Call Burden and Sleep Deprivation with Physician Burnout, Driving Accidents, and Medical Errors Among United States Neurointerventionalists

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

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")

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

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

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



Apr 12, 2022 11:43:22 EDT American Society of Neuroradiology

# Kyle Fargen

Disclosure Purpose: AJNR Disclosures

#### Disclosure Information:

1. Are you the corresponding author?

Nο

2. What is the Manuscript Title?

Correlation of Call Burden and Sleep Deprivation with Physician Burnout, Driving Accidents, and Medical Errors Among United States Neurointerventionalists

- 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

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

. 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

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



Joshua Hirsch

Apr 25, 2022 11:05:48 EDT
American Society of Neuroradiology

Disclosure Purpose: AJNR Disclosures

#### Disclosure Information:

1. Are you the corresponding author?

Nο

2. What is the Manuscript Title?

Correlation of Call Burden and Sleep Deprivation with Physician Burnout, Driving Accidents, and Medical Errors Among United States Neurointerventionalists

- 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 Data And Safety Monitoring Balt USA, LLC

Neither

b. Independent Contractor - Consultant Medtronic USA, Inc.

Maitha

c. Independent Contractor - Consultant Persica

Neither

d. Grant / Contract Harvey L. Neiman Health Policy Institute

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

e. Stock Option VIZ AI

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)

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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

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?

Nο

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?

Nο

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



Ali Shaibani

Apr 11, 2022 12:16:46 EDT
American Society of Neuroradiology

Disclosure Purpose: AJNR Disclosures

#### Disclosure Information:

1. Are you the corresponding author?

Yes

2. What is the Manuscript Title?

Correlation of Call Burden and Sleep Deprivation with Physician Burnout, Driving Accidents, and Medical Errors Among United States Neurointerventionalists

- 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.
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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")

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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)

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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

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

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No

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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



Michael Hurley

Apr 18, 2022 10:24:33 EDT
American Society of Neuroradiology

Disclosure Purpose: AJNR Disclosures

#### Disclosure Information:

1. Are you the corresponding author?

Nο

2. What is the Manuscript Title?

Correlation of Call Burden and Sleep Deprivation with Physician Burnout, Driving Accidents, and Medical Errors Among United States Neurointerventionalists.

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

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No

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No.

# Certification



Ramez Abdalla

Apr 18, 2022 10:21:10 EDT
American Society of Neuroradiology

Disclosure Purpose: AJNR Disclosures

#### Disclosure Information:

1. Are you the corresponding author?

Nο

2. What is the Manuscript Title?

Correlation of Call Burden and Sleep Deprivation with Physician Burnout, Driving Accidents, and Medical Errors Among United States Neurointerventionalists

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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

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# Certification



Sameer Ansari

Apr 11, 2022 10:44:27 EDT
American Society of Neuroradiology

Disclosure Purpose: AJNR Disclosures

#### Disclosure Information:

1. Are you the corresponding author?

Nο

2. What is the Manuscript Title?

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