Alexander Oliver

Discloser Identifier: AJNR-23-00701-104576785 Disclosure Purpose: AJNR Disclosures

Summary of Interests

I do not have any interests to disclose at this time.

Additional Questions

1. Are you the corresponding author?

Yes.

2. What is the Manuscript Title?

Intraluminal Flow Diverter Design Primer for Neurointerventionalists

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

AJNR-23-00701

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")

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

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



Discloser Identifier: AJNR-23-00701-110656394 Disclosure Purpose: AJNR Disclosures

Summary of Interests

I do not have any interests to disclose at this time.

Additional Questions

1. Are you the corresponding author?

No.

2. What is the Manuscript Title?

Intraluminal Flow Diverter Design Primer for 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")

- 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

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")

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

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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



Cem Bilgin

Discloser Identifier: AJNR-23-00701-105390640 Disclosure Purpose: AJNR Disclosures

Summary of Interests

I do not have any interests to disclose at this time.

Additional Questions

1. Are you the corresponding author?

No.

2. What is the Manuscript Title?

Intraluminal Flow Diverter Design Primer for 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

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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")

- 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

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")

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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



jeremy schaffer

Discloser Identifier: AJNR-23-00701-110657184 Disclosure Purpose: AJNR Disclosures

Summary of Interests

I do not have any interests to disclose at this time.

Additional Questions

1. Are you the corresponding author?

No.

2. What is the Manuscript Title?

Intraluminal Flow Diverter Design Primer for 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")

- 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

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

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



Ram Kadirvel

Disclosure Identifier: AJNR-23-00701-2540755 Disclosure Purpose: AJNR Disclosures

Summary of Interests

Company or Organization

Entity	Туре	Relevant to this Disclosure
Bionaut	Grant / Contract	
Cerenovus	Grant / Contract	
Endovascular Engineering	Grant / Contract	
FrontierBio	Grant / Contract	
Medtronic USA, Inc.	Grant / Contract	
MIVI Biosciences	Grant / Contract	
Monarch Biosciences	Grant / Contract	
National Institutes of Health	Grant / Contract	
National Institutes of Health	Grant / Contract	
Neurogami Medical	Grant / Contract	
Sensome	Grant / Contract	
Stryker	Grant / Contract	

Additional Questions

1. Are you the corresponding author?

No.

2. What is the Manuscript Title?

Medical Imaging Compatibility of Magnesium and Iron Based Bioresorbable Flow Diverters

- 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 Bionaut

Neither

b. Grant / Contract Cerenovus

Neither

c. Grant / Contract Endovascular Engineering

Neither

d. **Grant / Contract** FrontierBio

Neither

e. Grant / Contract Medtronic USA, Inc.

Neither

f. Grant / Contract MIVI Biosciences

Neither

g. Grant / Contract Monarch Biosciences

Neither

h. Grant / Contract National Institutes of Health

The relationship is in direct support of the work reported in the manuscript anytime from when the work was conceived

i. Grant / Contract National Institutes of Health

The relationship is in direct support of the work reported in the manuscript anytime from when the work was conceived

j. Grant / Contract Neurogami Medical

Neither

k. Grant / Contract Sensome

Neither

I. **Grant / Contract** Stryker

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")

Yes, as disclosed above

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

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")

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?

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?

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



David Kallmes

Discloser Identifier: AJNR-23-00701-2140481 Disclosure Purpose: AJNR Disclosures

Summary of Interests

Company or Organization

Entity	Туре	Relevant to this Disclosure	
Balt USA, LLC	Grant / Contract		
Cerenovus, Inc	Grant / Contract		
Conway Medical	Stock		
Insera Therapeutics	Grant / Contract		
Kypheze, Inc.	Stock		
Marblehead Medical	Stock		
Medtronic USA, Inc.	Grant / Contract		
MicroVention, Inc.	Grant / Contract		
MiVi Neurovascular	Grant / Contract		
Monarch Biosciences	Stock		
Nested Knowledge	Stock		
Nested Knowledge	Stock		
NoNO, Inc	Data And Safety Monitoring		
Category: Data And Safety Monitoring			
Piraeus Medical	Stock		
Stryker	Grant / Contract		
Stryker Corporation	Grant / Contract		
Superior Medical Experts	Stock		
Superior Medical Experts	Stock		
Vesalio	Grant / Contract		

Intellectual Property

Туре	Is Licensed	Relevant to this Disclosure
Other Intellectual Property - Balloon Guide Catheter technology	-	
Description: Balloon Guide Catheter technology Type: Submitted	I patents, and trade sec	rets
Patent - Kyphoplasty device	Yes	

Туре		Is Licensed	Relevant to this Disclosure
Description: Kyphoplasty device Patent Status: Issued Licensees:	Patent Holder: (Current Institution	
Licensee	Title		Date
Kypheze, Inc.			

Additional Questions

1. Are you the corresponding author?

No.

2. What is the Manuscript Title?

Medical Imaging Compatibility of Magnesium and Iron Based Bioresorbable Flow Diverters, which was recently submitted to the American Journal of Neuroradiology.

- 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. Other Professional Activities Data And Safety Monitoring NoNO, Inc

Neither

b. Grant / Contract Balt USA, LLC

Neither

c. Grant / Contract Cerenovus, Inc

Neither

d. **Grant / Contract** Insera Therapeutics

Neither

e. Grant / Contract Medtronic USA, Inc.

Neither

f. Grant / Contract MicroVention, Inc.

Neither

g. Grant / Contract MiVi Neurovascular

Neither

h. Grant / Contract Stryker

Neither

i. Grant / Contract Stryker Corporation

Neither

j. Grant / Contract Vesalio

Neither

k. Stock Conway Medical

Neither

	n. Stock Mionarch Biosciences	
	Neither	
	o. Stock Nested Knowledge	
	Neither	
	p. Stock Nested Knowledge	
	Neither	
	q. Stock Piraeus Medical	
	Neither	
	r. Stock Superior Medical Experts	
	Neither	
	s. Stock Superior Medical Experts	
	Neither	
	t. Other Intellectual Property Balloon Guide Catheter technology	
	Neither	
	u. Patent Kyphoplasty device	
	Neither	
	nfirm I have disclosed all direct support for the present manuscript (e.g. funding, provision of study materials, medic ting, article processing charges, etc.) There is no time limit for this item.	al
Υe		
	ase indicate below whether in the past 36 months you have had any of the following interests that are topically relat k reported in the manuscript.	∍d to the
	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	
	${\rm c.\ Payment\ for\ consulting\ (If\ you\ need\ to\ add\ an\ interest,\ return\ to\ the\ previous\ step\ and\ select\ "Independent\ Control of the previous\ step\ and\ select\ "Independent\ Control of the previous\ step\ and\ select\ "Independent\ Control of the\ previous\ step\ select\ "Independent\ "Independent\ Control of the\ previous\ step\ select\ "Independent\ "Indep$	actor")
	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 interest, return to the previous step and select "Independent Contractor" and include the correct information und "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")	

f. Payment for participation Data and safety monitoring board (If you need to add an interest, return to the previous step

I. Stock Kypheze, Inc.

m. Stock Marblehead Medical

No, I have no relevant interests of this type

No, I have no relevant interests of this type

and select "Independent Contractor")

Neither

Neither

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

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?

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



John Wainwright

Discloser Identifier: AJNR-23-00701-110657487 Disclosure Purpose: AJNR Disclosures

Summary of Interests

Company or Organization

Entity	Туре	Relevant to this Disclosure	
Galaxy Therapeutics	Consultant	Yes	
Category: Consultant			
Medtronic, Inc.	Employment	Yes	
Title: Director of R&D			
MIVI Neuroscience	Employment	Yes	
Title: VP R&D			
University of California, Irvine	Employment	Yes	
Title: Lecturer			

Intellectual Property

Туре	Is Licensed	Relevant to this Disclosure
Patent - Flow diverter coating	No	Yes

Description: Flow diverter coating

Patent Status: Issued

Licensees:

Patent Holder: Previous Institution

Additional Questions

1. Are you the corresponding author?

No.

2. What is the Manuscript Title?

Intraluminal Flow Diverter Design Primer for 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. Other Professional Activities Consultant Galaxy Therapeutics

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

b. Employment Medtronic, Inc.

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

c. Employment MIVI Neuroscience

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

d. Employment University of California, Irvine

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

e. Patent Flow diverter coating

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

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Yes, as disclosed above

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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

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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No, I have no relevant interests of this type

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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)

Yes, as disclosed above

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

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Certification

