Jorn Fierstra

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?
   The feasibility of assessing steno-occlusive cerebrovascular disease using a non-invasively generated dynamic susceptibility contrast agent: transient hypoxia induced deoxyhemoglobin

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. 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

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

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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?

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   Yes.
   a. Please describe below.
      At our institution we use repiract device and we periodically received the mask equipment from thornhill

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?
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**Company or Organization**

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</thead>
<tbody>
<tr>
<td>Thornhill Medical Inc.</td>
<td>Employment</td>
<td></td>
</tr>
</tbody>
</table>

| Title: Chief Scientific Officer |

| Thornhill Medical Inc. | Stock |                             |

**Additional Questions**

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   - The feasibility of assessing steno-occlusive cerebrovascular disease using a non-invasively generated dynamic susceptibility contrast agent: transient hypoxia induced deoxyhemoglobin

3. **What is the Manuscript Identifying Number (if you know it)?**
   - AJNR-23-00227

4. **Please select which of the following apply to each relationship or activity:**
   - a. **Employment** Thornhill Medical Inc.
     - The relationship is outside the work reported in the manuscript but topically related and within the past 36 months
   - b. **Stock** Thornhill Medical Inc.
     - The relationship is outside the work reported in the manuscript but topically related and within the past 36 months

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   - Yes

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   - 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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3. What is the Manuscript Identifying Number (if you know it)?
   AJNR-23-00227-71027145

4. Please select which of the following apply to each relationship or activity:
   You are not disclosing any interests to this organization.

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

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<tbody>
<tr>
<td>Hospital foundation</td>
<td>Grant / Contract</td>
<td>Yes</td>
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<tr>
<td>Thornhill Medical</td>
<td>Stock</td>
<td>Yes</td>
</tr>
</tbody>
</table>

Intellectual Property

<table>
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<th>Type</th>
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<tr>
<td>Patent - U.S. Publication number: 2016.0220115 Imaging Reductions in Cerebrovascular Reactivity</td>
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- **Description**: U.S. Publication number: 2016.0220115 Imaging Reductions in Cerebrovascular Reactivity
- **Patent Holder**: Current Institution
- **Patent Status**: Issued
- **Licensees**: Thornhill Medical

Additional Questions

1. **Are you the corresponding author?**
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   - The feasibility of assessing steno-occlusive cerebrovascular disease using a non-invasively generated dynamic susceptibility contrast agent: transient hypoxia induced deoxyhemoglobin.

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   - a. **Grant / Contract** Hospital foundation
     - The relationship is in direct support of the work reported in the manuscript anytime from when the work was conceived.
   - b. **Stock** Thornhill Medical
     - The relationship is in direct support of the work reported in the manuscript anytime from when the work was conceived.
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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. Other Professional Activities - Consultant Johnson and Johnson International
      Neither
   b. Other Professional Activities - Consultant Medtronic
      Neither
   c. Other Professional Activities - Consultant 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.
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   AJNR-23-00227.R2

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   AJNR-23-00227

4. Please select which of the following apply to each relationship or activity:
   
   a. Employment: Thornhill Medical
      The relationship is outside the work reported in the manuscript but topically related and within the past 36 months

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   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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No, I have no relevant interests of this type

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

No.

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

No.

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

No.

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

No.

Certification

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