Summary of Interests

Company or Organization

<table>
<thead>
<tr>
<th>Entity</th>
<th>Type</th>
<th>Relevant to this Disclosure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mayo Clinic</td>
<td>Employment</td>
<td>Yes</td>
</tr>
</tbody>
</table>

Title: Senior Data Engineer, Assistant Professor of Radiology

Additional Questions

1. Are you the corresponding author?
   No.

2. What is the Manuscript Title?
   Prediction of surgical outcomes in normal pressure hydrocephalus by magnetic resonance elastography.

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

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”)
      No, I have no relevant interests of this type
   c. Payment for consulting (If you need to add an interest, return to the previous step and select “Independent Contractor”)
      No, I have no relevant interests of this type
   d. Payments or honoraria for lectures, presentations, speakers bureaus, or educational events (If you need to add an interest, return to the previous step and select “Independent Contractor” and include the correct information under “Consultant”)
      No, I have no relevant interests of this type
e. Payment for service on an advisory board (If you need to add an interest, return to the previous step and select “Independent Contractor,” and choose “Other”)  
   No, I have no relevant interests of this type

f. Payment for participation Data and safety monitoring board (If you need to add an interest, return to the previous step and select “Independent Contractor”)  
   No, I have no relevant interests of this type

g. Expert witness testimony (If you need to add an interest, return to the previous step and select “Independent Contractor”)  
   No, I have no relevant interests of this type

h. Royalties from Patents, Trademarks, Copyrights or other intellectual property (If you need to add an interest, return to the previous step and select the appropriate interest type)  
   No, I have no relevant interests of this type

i. Patents planned, issued, or pending, whether or not you receive royalties (If you need to add an interest, return to the previous step and select “Patents”)  
   No, I have no relevant interests of this type

j. Fiduciary Officer or Other Board Membership (If you need to add an interest, return to the previous step and select “Fiduciary Officer”)  
   No, I have no relevant interests of this type

k. Stock or stock options (If you need to add an interest, return to the previous step and select the appropriate interest type)  
   No, I have no relevant interests of this type

l. Support for attending meetings or other travel (If you need to add an interest, return to the previous step and select “Travel”)  
   No, I have no relevant interests of this type

7. Was any individual paid to provide professional writing assistance with this manuscript?  
   No.

8. Have you or your institution received equipment, materials, drugs, or services in direct support of the work in the manuscript (without time limit) not disclosed above?  
   No.

9. In the past 36 months, have you received equipment, materials, drugs, medical writing, gifts or other services from for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript not disclosed above?  
   No.

10. Are there other financial or non-financial interests that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work not disclosed above.
    No.

Certification
I certify that I have answered every question and have not altered the wording of any of the questions on this form.
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?
   Prediction of surgical outcomes in normal pressure hydrocephalus by magnetic resonance elastography

3. What is the Manuscript Identifying Number (if you know it)?
   I do not know it

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

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

6. Please indicate below whether in the past 36 months you have had any of the following interests that are topically related to the work reported in the manuscript.
   a. Employment (If you need to add an interest, return to the previous step and select “Employment”)
      No, I have no relevant interests of this type
   b. Grants or contracts for research (If you need to add an interest, return to the previous step and select “Grant/Contract”)
      No, I have no relevant interests of this type
   c. Payment for consulting (If you need to add an interest, return to the previous step and select “Independent Contractor”) 
      No, I have no relevant interests of this type
   d. Payments or honoraria for lectures, presentations, speakers bureaus, or educational events (If you need to add an interest, return to the previous step and select “Independent Contractor” and include the correct information under “Consultant”) 
      No, I have no relevant interests of this type
   e. Payment for service on an advisory board (If you need to add an interest, return to the previous step and select “Independent Contractor,” and choose “Other”)
      No, I have no relevant interests of this type
   f. Payment for participation Data and safety monitoring board (If you need to add an interest, return to the previous step and select “Independent Contractor”)
      No, I have no relevant interests of this type
g. Expert witness testimony (If you need to add an interest, return to the previous step and select “Independent Contractor”) 
No, I have no relevant interests of this type 

h. Royalties from Patents, Trademarks, Copyrights or other intellectual property (If you need to add an interest, return to the previous step and select the appropriate interest type) 
No, I have no relevant interests of this type 

i. Patents planned, issued, or pending, whether or not you receive royalties (If you need to add an interest, return to the previous step and select “Patents”) 
No, I have no relevant interests of this type 

j. Fiduciary Officer or Other Board Membership (If you need to add an interest, return to the previous step and select “Fiduciary Officer”) 
No, I have no relevant interests of this type 

k. Stock or stock options (If you need to add an interest, return to the previous step and select the appropriate interest type) 
No, I have no relevant interests of this type 

l. Support for attending meetings or other travel (If you need to add an interest, return to the previous step and select “Travel”) 
No, I have no relevant interests of this type 

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.
Summary of Interests

Company or Organization

<table>
<thead>
<tr>
<th>Entity</th>
<th>Type</th>
<th>Relevant to this Disclosure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mayo Clinic</td>
<td>Employment</td>
<td>Yes</td>
</tr>
<tr>
<td>Title: Research Fellow</td>
<td></td>
<td></td>
</tr>
<tr>
<td>National Institute of Biomedical Imaging and Bioengineering</td>
<td>Grant / Contract</td>
<td>Yes</td>
</tr>
</tbody>
</table>

Additional Questions

1. Are you the corresponding author?
   Yes.

2. What is the Manuscript Title?
   Prediction of surgical outcomes in normal pressure hydrocephalus by magnetic resonance elastography

3. What is the Manuscript Identifying Number (if you know it)?
   AJNR-23-00646

4. Please select which of the following apply to each relationship or activity:
   a. Employment Mayo Clinic
      The relationship is in direct support of the work reported in the manuscript anytime from when the work was conceived
   b. Grant / Contract National Institute of Biomedical Imaging and Bioengineering
      The relationship is in direct support of the work reported in the manuscript anytime from when the work was conceived

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”)
      No, I have no relevant interests of this type
   c. Payment for consulting (If you need to add an interest, return to the previous step and select “Independent Contractor”)
      No, I have no relevant interests of this type
d. Payments or honoraria for lectures, presentations, speakers bureaus, or educational events (If you need to add an interest, return to the previous step and select “Independent Contractor” and include the correct information under “Consultant”)

No, I have no relevant interests of this type

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

No, I have no relevant interests of this type

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

No, I have no relevant interests of this type

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

No, I have no relevant interests of this type

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

No, I have no relevant interests of this type

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

No, I have no relevant interests of this type

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

No, I have no relevant interests of this type

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

No, I have no relevant interests of this type

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

No, I have no relevant interests of this type

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

No.

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

No.

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

No.

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

No.

Certification

I certify that I have answered every question and have not altered the wording of any of the questions on this form.
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?
   Changes in Ventricular and Cortical Volumes Following Shunt Placement in Patients with Idiopathic Normal Pressure Hydrocephalus

3. What is the Manuscript Identifying Number (if you know it)?
   RAD-20-4070

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
No, I have no relevant interests of this type

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

No, I have no relevant interests of this type

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

No, I have no relevant interests of this type

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

No, I have no relevant interests of this type

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

No, I have no relevant interests of this type

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

No, I have no relevant interests of this type

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

No, I have no relevant interests of this type

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

No.

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

No.

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

No.

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

No.

Certification

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

Company or Organization

<table>
<thead>
<tr>
<th>Entity</th>
<th>Type</th>
<th>Relevant to this Disclosure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Resoundant</td>
<td>Stock</td>
<td>Yes</td>
</tr>
</tbody>
</table>

Intellectual Property

<table>
<thead>
<tr>
<th>Type</th>
<th>Is Licensed</th>
<th>Relevant to this Disclosure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patent - MRE technology</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>

Description: MRE technology  
Patent Status:  
Licencsees:

<table>
<thead>
<tr>
<th>Licensee</th>
<th>Title</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Electric</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Resoundant</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Additional Questions

1. Are you the corresponding author?
   No.

2. What is the Manuscript Title?
   Changes in Ventricular and Cortical Volumes Following Shunt Placement in Patients with Idiopathic Normal Pressure Hydrocephalus

3. What is the Manuscript Identifying Number (if you know it)?
   AJNR-21-00548

4. Please select which of the following apply to each relationship or activity:
   a. Stock Resoundant
      Neither
   b. Patent MRE technology
      Neither

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

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

- **a. Employment** (If you need to add an interest, return to the previous step and select “Employment”)
  
  No, I have no relevant interests of this type

- **b. Grants or contracts for research** (If you need to add an interest, return to the previous step and select “Grant/Contract”)
  
  No, I have no relevant interests of this type

- **c. Payment for consulting** (If you need to add an interest, return to the previous step and select “Independent Contractor”)
  
  No, I have no relevant interests of this type

- **d. Payments or honoraria for lectures, presentations, speakers bureaus, or educational events** (If you need to add an interest, return to the previous step and select “Independent Contractor” and include the correct information under “Consultant”)
  
  No, I have no relevant interests of this type

- **e. Payment for service on an advisory board** (If you need to add an interest, return to the previous step and select “Independent Contractor,” and choose “Other”)
  
  No, I have no relevant interests of this type

- **f. Payment for participation Data and safety monitoring board** (If you need to add an interest, return to the previous step and select “Independent Contractor”)
  
  No, I have no relevant interests of this type

- **g. Expert witness testimony** (If you need to add an interest, return to the previous step and select “Independent Contractor”)
  
  No, I have no relevant interests of this type

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

- **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”)
  
  Yes, as disclosed above

- **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)
  
  Yes, as disclosed above

- **l. Support for attending meetings or other travel** (If you need to add an interest, return to the previous step and select “Travel”)
  
  No, I have no relevant interests of this type

7. **Was any individual paid to provide professional writing assistance with this manuscript?**
   
   No.

8. **Have you or your institution received equipment, materials, drugs, or services in direct support of the work in the manuscript (without time limit) not disclosed above?**
   
   No.

9. **In the past 36 months, have you received equipment, materials, drugs, medical writing, gifts or other services from for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript not disclosed above?**
   
   No.
10. Are there other financial or non-financial interests that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work not disclosed above.

No.

Certification

I certify that I have answered every question and have not altered the wording of any of the questions on this form.
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?
   Prediction of surgical outcomes in normal pressure hydrocephalus by magnetic resonance elastography.

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

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

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

6. Please indicate below whether in the past 36 months you have had any of the following interests that are topically related to the work reported in the manuscript.
   a. Employment (If you need to add an interest, return to the previous step and select “Employment”)
      No, I have no relevant interests of this type
   b. Grants or contracts for research (If you need to add an interest, return to the previous step and select “Grant/Contract”)
      No, I have no relevant interests of this type
   c. Payment for consulting (If you need to add an interest, return to the previous step and select “Independent Contractor”)
      No, I have no relevant interests of this type
   d. Payments or honoraria for lectures, presentations, speakers bureaus, or educational events (If you need to add an interest, return to the previous step and select “Independent Contractor” and include the correct information under “Consultant”)
      No, I have no relevant interests of this type
   e. Payment for service on an advisory board (If you need to add an interest, return to the previous step and select “Independent Contractor,” and choose “Other”)
      No, I have no relevant interests of this type
   f. Payment for participation Data and safety monitoring board (If you need to add an interest, return to the previous step and select “Independent Contractor”)
      No, I have no relevant interests of this type
g. Expert witness testimony (If you need to add an interest, return to the previous step and select “Independent Contractor”)
   No, I have no relevant interests of this type

h. Royalties from Patents, Trademarks, Copyrights or other intellectual property (If you need to add an interest, return to the previous step and select the appropriate interest type)
   No, I have no relevant interests of this type

i. Patents planned, issued, or pending, whether or not you receive royalties (If you need to add an interest, return to the previous step and select “Patents”)
   No, I have no relevant interests of this type

j. Fiduciary Officer or Other Board Membership (If you need to add an interest, return to the previous step and select “Fiduciary Officer”)
   No, I have no relevant interests of this type

k. Stock or stock options (If you need to add an interest, return to the previous step and select the appropriate interest type)
   No, I have no relevant interests of this type

l. Support for attending meetings or other travel (If you need to add an interest, return to the previous step and select “Travel”)
   No, I have no relevant interests of this type

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.
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?
   Digital Subtraction Angiography Quantitative Analysis and Predictive Modeling of Obliteration in Cerebral Arteriovenous Malformation Following Stereotactic Radiosurgery

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

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

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

6. Please indicate below whether in the past 36 months you have had any of the following interests that are topically related to the work reported in the manuscript.
   a. Employment (If you need to add an interest, return to the previous step and select “Employment”)
      No, I have no relevant interests of this type

   b. Grants or contracts for research (If you need to add an interest, return to the previous step and select “Grant/Contract”)
      No, I have no relevant interests of this type

   c. Payment for consulting (If you need to add an interest, return to the previous step and select “Independent Contractor”)
      No, I have no relevant interests of this type

   d. Payments or honoraria for lectures, presentations, speakers bureaus, or educational events (If you need to add an interest, return to the previous step and select “Independent Contractor” and include the correct information under "Consultant")
      No, I have no relevant interests of this type

   e. Payment for service on an advisory board (If you need to add an interest, return to the previous step and select “Independent Contractor,” and choose “Other”)
      No, I have no relevant interests of this type

   f. Payment for participation Data and safety monitoring board (If you need to add an interest, return to the previous step and select “Independent Contractor”)
      No, I have no relevant interests of this type
g. Expert witness testimony (If you need to add an interest, return to the previous step and select “Independent Contractor”)
   No, I have no relevant interests of this type

h. Royalties from Patents, Trademarks, Copyrights or other intellectual property (If you need to add an interest, return to the previous step and select the appropriate interest type)
   No, I have no relevant interests of this type

i. Patents planned, issued, or pending, whether or not you receive royalties (If you need to add an interest, return to the previous step and select “Patents”)
   No, I have no relevant interests of this type

j. Fiduciary Officer or Other Board Membership (If you need to add an interest, return to the previous step and select “Fiduciary Officer”)
   No, I have no relevant interests of this type

k. Stock or stock options (If you need to add an interest, return to the previous step and select the appropriate interest type)
   No, I have no relevant interests of this type

l. Support for attending meetings or other travel (If you need to add an interest, return to the previous step and select “Travel”)
   No, I have no relevant interests of this type

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.
Summary of Interests

Company or Organization

<table>
<thead>
<tr>
<th>Entity</th>
<th>Type</th>
<th>Relevant to this Disclosure</th>
</tr>
</thead>
<tbody>
<tr>
<td>American Academy of Neurology</td>
<td>Other</td>
<td></td>
</tr>
<tr>
<td>National Institute of Health</td>
<td>Grant / Contract</td>
<td></td>
</tr>
<tr>
<td>National Institute of Health</td>
<td>Data And Safety Monitoring</td>
<td></td>
</tr>
</tbody>
</table>

Category: Other

Additional Questions

1. Are you the corresponding author?
   No.

2. What is the Manuscript Title?
   Changes in Ventricular and Cortical Volumes Following Shunt Placement in Patients with Idiopathic Normal Pressure Hydrocephalus

3. What is the Manuscript Identifying Number (if you know it)?
   Do not know

4. Please select which of the following apply to each relationship or activity:
   a. Other Professional Activities - Other American Academy of Neurology
      Neither
   b. Other Professional Activities - Data And Safety Monitoring National Institute of Health
      Neither
   c. Grant / Contract National Institute of Health
      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.
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”)

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 on a Data and safety monitoring board (If you need to add an interest, return to the previous step and select “Independent Contractor”)

Yes, as disclosed above

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

No, I have no relevant interests of this type

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

No, I have no relevant interests of this type

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

No, I have no relevant interests of this type

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

No, I have no relevant interests of this type

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

No, I have no relevant interests of this type

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

No, I have no relevant interests of this type

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

No.

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

No.

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

No.

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

No.
Certification

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

Discloser Identifier: AJNR-23-00646-42779535

Disclosure Purpose: AJNR Disclosures

Summary of Interests

Intellectual Property

<table>
<thead>
<tr>
<th>Type</th>
<th>Is Licensed</th>
<th>Relevant to this Disclosure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patent - Magnetic resonance elastography technology</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>

Description: Magnetic resonance elastography technology  
Patent Status: Issued  
Licensees:  

Patent Holder: Current Institution

Additional Questions

1. Are you the corresponding author?  
   No.

2. What is the Manuscript Title?  
   Prediction of surgical outcomes in normal pressure hydrocephalus by magnetic resonance elastography

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

4. Please select which of the following apply to each relationship or activity:  
   This question does not apply to any of the interests you are including in this disclosure. If you include additional interests in the previous step, you may be required to answer this question.
   a. Patent Magnetic resonance elastography technology  
      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

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”)
Yes, as disclosed above

j. Fiduciary Officer or Other Board Membership (If you need to add an interest, return to the previous step and select “Fiduciary Officer”)
No, I have no relevant interests of this type

k. Stock or stock options (If you need to add an interest, return to the previous step and select the appropriate interest type)
No, I have no relevant interests of this type

l. Support for attending meetings or other travel (If you need to add an interest, return to the previous step and select “Travel”)
No, I have no relevant interests of this type

7. Was any individual paid to provide professional writing assistance with this manuscript?
No.

8. Have you or your institution received equipment, materials, drugs, or services in direct support of the work in the manuscript (without time limit) not disclosed above?
No.

9. In the past 36 months, have you received equipment, materials, drugs, medical writing, gifts or other services from for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript not disclosed above?
No.

10. Are there other financial or non-financial interests that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work not disclosed above.
No.

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

Company or Organization

<table>
<thead>
<tr>
<th>Entity</th>
<th>Type</th>
<th>Relevant to this Disclosure</th>
</tr>
</thead>
<tbody>
<tr>
<td>DePuy Synthes Products LLC</td>
<td>Consultant</td>
<td></td>
</tr>
<tr>
<td>Category: Consultant</td>
<td></td>
<td></td>
</tr>
<tr>
<td>InjectSense</td>
<td>Other</td>
<td></td>
</tr>
<tr>
<td>Category: Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>InjectSense</td>
<td>Stock</td>
<td></td>
</tr>
<tr>
<td>International Society for Hydrocephalus and CSF Disorders</td>
<td>Fiduciary Officer</td>
<td></td>
</tr>
<tr>
<td>Official Title: Executive Board Member</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SI Bone</td>
<td>Grant / Contract</td>
<td></td>
</tr>
<tr>
<td>Category: Consultant</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SI Bone</td>
<td>Consultant</td>
<td></td>
</tr>
<tr>
<td>Category: Consultant</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stryker</td>
<td>Grant / Contract</td>
<td></td>
</tr>
</tbody>
</table>

Additional Questions

1. Are you the corresponding author?
   No.

2. What is the Manuscript Title?
   Changes in Ventricular and Cortical Volumes Following Shunt Placement in Patients with Idiopathic Normal Pressure Hydrocephalus

3. What is the Manuscript Identifying Number (if you know it)?
   Not sure

4. Please select which of the following apply to each relationship or activity:
   a. Other Professional Activities - Consultant DePuy Synthes Products LLC
      Neither
   b. Other Professional Activities - Other InjectSense
The relationship is outside the work reported in the manuscript but topically related and within the past 36 months.

c. Other Professional Activities - Consultant SI Bone

Neither

d. Fiduciary Officer International Society for Hydrocephalus and CSF Disorders

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

e. Grant / Contract SI Bone

Neither

f. Grant / Contract Stryker

Neither

g. Stock InjectSense

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”)

Yes, as disclosed above

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

Yes, as disclosed above

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

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
No, I have no relevant interests of this type

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

No, I have no relevant interests of this type

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

No, I have no relevant interests of this type

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

No.

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

No.

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

No.

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

No.

Certification

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

Company or Organization

<table>
<thead>
<tr>
<th>Entity</th>
<th>Type</th>
<th>Relevant to this Disclosure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Batterman Family Foundation</td>
<td>Grant / Contract</td>
<td></td>
</tr>
<tr>
<td>EISAI INC.</td>
<td>Data And Safety Monitoring</td>
<td></td>
</tr>
<tr>
<td>Navinetics</td>
<td>Stock</td>
<td></td>
</tr>
<tr>
<td>Resoundant</td>
<td>Stock</td>
<td></td>
</tr>
</tbody>
</table>

Category: Data And Safety Monitoring

Intellectual Property

<table>
<thead>
<tr>
<th>Type</th>
<th>Is Licensed</th>
<th>Relevant to this Disclosure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patent - Brain MR Elastography</td>
<td>Yes</td>
<td></td>
</tr>
</tbody>
</table>

Description: Brain MR Elastography
Patent Status: Provisional
Patent Holder: Current Institution

Licensees:

<table>
<thead>
<tr>
<th>Licensee</th>
<th>Title</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mayo Clinic</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Additional Questions

1. Are you the corresponding author?
   No.

2. What is the Manuscript Title?
   Non-Stenotic Carotid Plaques and Embolic Stroke of Undetermined Source: A Multi-modality Review

3. What is the Manuscript Identifying Number (if you know it)?
   Not known

4. Please select which of the following apply to each relationship or activity:
   a. Other Professional Activities - Data And Safety Monitoring EISAI INC.
      Neither
   b. Grant / Contract Batterman Family Foundation
      Neither
c. **Stock** Navinetics
   Neither

d. **Stock** Resoundant
   Neither

e. **Patent** Brain MR Elastography
   Neither

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

   Yes

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

   a. **Employment** (If you need to add an interest, return to the previous step and select "Employment")
      No, I have no relevant interests of this type

   b. **Grants or contracts for research** (If you need to add an interest, return to the previous step and select "Grant/Contract")
      No, I have no relevant interests of this type

   c. **Payment for consulting** (If you need to add an interest, return to the previous step and select "Independent Contractor")
      No, I have no relevant interests of this type

   d. Payments or honoraria for lectures, presentations, speakers bureaus, or educational events (If you need to add an interest, return to the previous step and select "Independent Contractor" and include the correct information under "Consultant")
      No, I have no relevant interests of this type

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

   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")
      Yes, as disclosed above

   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)
      Yes, as disclosed above

   l. **Support for attending meetings or other travel** (If you need to add an interest, return to the previous step and select "Travel")
No, I have no relevant interests of this type

7. **Was any individual paid to provide professional writing assistance with this manuscript?**
   
   No.

8. **Have you or your institution received equipment, materials, drugs, or services in direct support of the work in the manuscript (without time limit) not disclosed above?**
   
   No.

9. **In the past 36 months, have you received equipment, materials, drugs, medical writing, gifts or other services from for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript not disclosed above?**
   
   No.

10. **Are there other financial or non-financial interests that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work not disclosed above?**
    
    No.

**Certification**

I certify that I have answered every question and have not altered the wording of any of the questions on this form.
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?
   Prediction of surgical outcomes in normal pressure hydrocephalus by magnetic resonance elastography

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 in a data and safety monitoring board (If you need to add an interest, return to the previous step and select “Independent Contractor”)
      No, I have no relevant interests of this type
g. Expert witness testimony (If you need to add an interest, return to the previous step and select “Independent Contractor”)
   No, I have no relevant interests of this type

h. Royalties from Patents, Trademarks, Copyrights or other intellectual property (If you need to add an interest, return to the previous step and select the appropriate interest type)
   No, I have no relevant interests of this type

i. Patents planned, issued, or pending, whether or not you receive royalties (If you need to add an interest, return to the previous step and select “Patents”)
   No, I have no relevant interests of this type

j. Fiduciary Officer or Other Board Membership (If you need to add an interest, return to the previous step and select “Fiduciary Officer”)
   No, I have no relevant interests of this type

k. Stock or stock options (If you need to add an interest, return to the previous step and select the appropriate interest type)
   No, I have no relevant interests of this type

l. Support for attending meetings or other travel (If you need to add an interest, return to the previous step and select “Travel”)
   No, I have no relevant interests of this type

7. Was any individual paid to provide professional writing assistance with this manuscript?
   No.

8. Have you or your institution received equipment, materials, drugs, or services in direct support of the work in the manuscript (without time limit) not disclosed above?
   No.

9. In the past 36 months, have you received equipment, materials, drugs, medical writing, gifts or other services from for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript not disclosed above?
   No.

10. Are there other financial or non-financial interests that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work not disclosed above.
    No.

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