

Discloser Identifier: AJNR-23-00909-53426271

Disclosure Purpose: AJNR Disclosures

Summary of Interests

Company or Organization

Entity	Type	Relevant to this Disclosure
Johnson & Johnson Health Care Systems Inc.	Grant / Contract	
Johnson & Johnson Health Care Systems Inc.	Travel	
Medtronic USA, Inc.	Consultant	Yes
Category: Consultant		
Medtronic USA, Inc.	Travel	
MicroVention, Inc.	Grant / Contract	
MicroVention, Inc.	Travel	
Stryker	Travel	

Additional Questions

1. Are you the corresponding author?

Yes.

2. What is the Manuscript Title?

Prasugrel Single Antiplatelet Therapy versus Aspirin and Clopidogrel Dual Antiplatelet Therapy for Flow Diverter Treatment for Cerebral Aneurysms: A Retrospective Multicenter Study

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** Medtronic USA, Inc.

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

b. **Grant / Contract** Johnson & Johnson Health Care Systems Inc.

Neither

c. **Grant / Contract** MicroVention, Inc.

Neither

d. **Travel** Johnson & Johnson Health Care Systems Inc.

Neither

e. **Travel** Medtronic USA, Inc.

Neither

f. **Travel** MicroVention, Inc.

Neither

g. **Travel** 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. **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.



Discloser Identifier: AJNR-23-00909-17806543

Disclosure Purpose: AJNR Disclosures

Summary of Interests

Company or Organization

Entity	Type	Relevant to this Disclosure
Medtronic USA, Inc.	Consultant	
Category: Consultant		
MicroVention, Inc.	Consultant	
Category: Consultant		

Additional Questions

1. Are you the corresponding author?

No.

2. What is the Manuscript Title?

AJNR Disclosure Requested for Prasugrel Single Antiplatelet Therapy versus Aspirin and Clopidogrel Dual Antiplatelet Therapy for Flow Divorter Treatment for Cerebral Aneurysms: A Retrospective Multicenter Study

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** Medtronic USA, Inc.

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

b. **Other Professional Activities - Consultant** MicroVention, Inc.

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

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

Yes

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

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")**

Yes, as disclosed above

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

Yes, as disclosed above

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

No, I have no relevant interests of this type

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

No, I have no relevant interests of this type

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

No, I have no relevant interests of this type

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

No, I have no relevant interests of this type

- 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")**

Yes, as disclosed above

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.

Discloser Identifier: AJNR-23-00909-112802271

Disclosure Purpose: AJNR Disclosures

Summary of Interests

Company or Organization

Entity	Type	Relevant to this Disclosure
Medtronic	Consultant	
Category: Consultant		
MicroVention, Inc.	Consultant	
Category: Consultant		
Stryker	Consultant	
Category: Consultant		

Additional Questions

1. Are you the corresponding author?

No.

2. What is the Manuscript Title?

Outcomes with Endovascular Treatment of patients with M2 segment Middle Cerebral Artery Occlusion in The Late Time Window

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** Medtronic

Neither

b. **Other Professional Activities - Consultant** MicroVention, Inc.

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

c. **Other Professional Activities - Consultant** Stryker

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")**

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.



Discloser Identifier: AJNR-23-00909-58919407

Disclosure Purpose: AJNR Disclosures

Summary of Interests

Company or Organization

Entity	Type	Relevant to this Disclosure
European Union	Grant / Contract	

Additional Questions

1. Are you the corresponding author?

No.

2. What is the Manuscript Title?

Prasugrel Single Antiplatelet Therapy versus Aspirin and Clopidogrel Dual Antiplatelet Therapy for Flow Diverter Treatment for Cerebral Aneurysms: A Retrospective Multicenter Study

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** European Union

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”)

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.

Discloser Identifier: AJNR-23-00909-105875807

Disclosure Purpose: AJNR Disclosures

Summary of Interests

Company or Organization

Entity	Type	Relevant to this Disclosure
Medtronic	Other	
Category: Other		
MicroVention, Inc.	Consultant	
Category: Consultant		

Additional Questions

1. Are you the corresponding author?

No.

2. What is the Manuscript Title?

The FRESH study: Treatment of intracranial aneurysms with the new FRED X flow diverter with antithrombotic surface treatment technology – first multicenter experience in 161 patients

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 - Other** Medtronic

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

b. **Other Professional Activities - Consultant** MicroVention, Inc.

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

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

Yes

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

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")**

Yes, as disclosed above

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

Yes, as disclosed above

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

No, I have no relevant interests of this type

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

No, I have no relevant interests of this type

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

No, I have no relevant interests of this type

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

No, I have no relevant interests of this type

- 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")**

Yes, as disclosed above

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.

Discloser Identifier: AJNR-23-00909-78243370

Disclosure Purpose: AJNR Disclosures

Summary of Interests

Company or Organization

Entity	Type	Relevant to this Disclosure
Bend ItTechnologies	Stock	
Borvo Medical	Stock	
Medtronic USA, Inc.	Consultant	
Category: Consultant		
MicroVention, Inc.	Consultant	
Category: Consultant		
Neuravention Inc	Stock	
Piraeus Inc	Stock	
Prometheus Inc	Stock	
Sim&Cure	Stock	
Vesalio	Stock	

Additional Questions

1. Are you the corresponding author?

No.

2. What is the Manuscript Title?

AJNR Disclosure Requested for Prasugrel Single Antiplatelet Therapy versus Aspirin and Clopidogrel Dual Antiplatelet Therapy for Flow Diverter Treatment for Cerebral Aneurysms: A Retrospective Multicenter Study

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** Medtronic USA, Inc.

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

b. **Other Professional Activities - Consultant** MicroVention, Inc.

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

c. **Stock** Bend ItTechnologies

Neither

d. **Stock** Borvo Medical

Neither

e. **Stock** Neuravention Inc

Neither

f. **Stock** Piraeus Inc

Neither

g. **Stock** Prometheus Inc

Neither

h. **Stock** Sim&Cure

Neither

i. **Stock** Vesalio

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")**

Yes, as disclosed above

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

Yes, as disclosed above

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

Yes, as disclosed above

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)

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.

Discloser Identifier: AJNR-23-00909-95926498

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?

Prasugrel Single Antiplatelet Therapy versus Aspirin and Clopidogrel Dual Antiplatelet Therapy for Flow Diverter Treatment for Cerebral Aneurysms: A Retrospective Multicenter Study

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.

Discloser Identifier: AJNR-23-00909-4089823

Disclosure Purpose: AJNR Disclosures

Summary of Interests

Company or Organization

Entity	Type	Relevant to this Disclosure
MicroVention, Inc.	Consultant	
Category: Consultant		
neuravention inc	Stock	

Additional Questions

1. Are you the corresponding author?

No.

2. What is the Manuscript Title?

Crossing Y Stent Assisted Coiling with LVIS EVO Stents for Wide neck Bifurcation Aneurysms: Technical Considerations and Mid-term results

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

Prasugrel Single Antiplatelet Therapy versus Aspirin and Clopidogrel Dual Antiplatelet Therapy for Flow Diverter Treatment for Cerebral Aneurysms: A Retrospective Multicenter Study

4. Please select which of the following apply to each relationship or activity:

a. **Other Professional Activities - Consultant** MicroVention, Inc.

Neither

b. **Stock** neuravention inc

Neither

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

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.

Discloser Identifier: AJNR-23-00909-84479279

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?

Prasugrel Single Antiplatelet Therapy versus Aspirin and Clopidogrel Dual Antiplatelet Therapy for Flow Diverter Treatment for Cerebral Aneurysms: A Retrospective Multicenter Study

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.

Discloser Identifier: AJNR-23-00909-26223760

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?

Prasugrel Single Antiplatelet Therapy versus Aspirin and Clopidogrel Dual Antiplatelet Therapy for Flow Diverter Treatment for Cerebral Aneurysms: A Retrospective Multicenter Study

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.

Naci Kocer

Discloser Identifier: AJNR-23-00909-2142280

Disclosure Purpose: AJNR Disclosures

Summary of Interests

Company or Organization

Entity	Type	Relevant to this Disclosure
MicroVention, Inc.	Other	
Category: Other		

Additional Questions

1. Are you the corresponding author?

No.

2. What is the Manuscript Title?

The FRESH study:Treatment of intracranial aneurysms with the new FREDX flow diverter with antithrombotic surface treatment technology-firt multicenter experience in 161 patients

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 - Other** MicroVention, Inc.

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

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

Yes

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

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")**

Yes, as disclosed above

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

Yes, as disclosed above

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

Yes, as disclosed above

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

No, I have no relevant interests of this type

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

No, I have no relevant interests of this type

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

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

No, I have no relevant interests of this type

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

No, I have no relevant interests of this type

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

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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?

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.

Discloser Identifier: AJNR-23-00909-28088696

Disclosure Purpose: AJNR Disclosures

Summary of Interests

Company or Organization

Entity	Type	Relevant to this Disclosure
Medtronic	Grant / Contract	
MicroVention, Inc.	Grant / Contract	
Stryker	Grant / Contract	

Additional Questions

1. Are you the corresponding author?

Yes.

2. What is the Manuscript Title?

Prasugrel Single Antiplatelet Therapy versus Aspirin and Clopidogrel Dual Antiplatelet Therapy for Flow Diverter Treatment for Cerebral Aneurysms: A Retrospective Multicenter Study

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** Medtronic

Neither

b. **Grant / Contract** MicroVention, Inc.

Neither

c. **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.

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No, I have no relevant interests of this type

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

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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

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