

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

1. Identifying information.

2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

3. Relevant financial activities outside the submitted work.

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Chau Hung

2. Surname (Last Name)
Lee

3. Date
24-May-2020

4. Are you the corresponding author? Yes No
Corresponding Author's Name
Patrick Asbach

5. Manuscript Title
Clinical utility of combined T2-weighted imaging and T2-mapping in the detection of prostate cancer: a multi-observer study.

6. Manuscript Identifying Number (if you know it)
QIMS-20-222-R1

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Siemens Healthineers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Funding and technical support

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Lee reports grants and non-financial support from Siemens Healthineers, during the conduct of the study; .

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Matthias	2. Surname (Last Name) Taupitz	3. Date 02-June-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Patrick Asbach
5. Manuscript Title Clinical utility of combined T2-weighted imaging and T2-mapping in the detection of prostate cancer: a multi-observer study		
6. Manuscript Identifying Number (if you know it) QIMS-20-222-R1		

Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? Yes No

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Siemens Healthineers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

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CRC 1340/1 (DFG, Germany Research Foundation)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	grant for research on imaging of extracellular matrix

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Section 1. Identifying Information

1. Given Name (First Name)
Patrick

2. Surname (Last Name)
Asbach

3. Date
02-June-2020

4. Are you the corresponding author? Yes No

5. Manuscript Title
Clinical utility of combined T2-weighted imaging and T2-mapping in the detection of prostate cancer: a multi-observer study

6. Manuscript Identifying Number (if you know it)
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b.e.imaging	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	speaker, prostate workshop
CRC 1340/1 (DFG, Germany Research Foundation)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	grant on matrix imaging
ESR European Society of Radiology	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	travel grant prostate workshop

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DRG Germany Roentgen Society	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Travel grant Prostate Workshop
CSR Chinese Society of Radiology	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Travel grant Radiology Conference

Section 4. Intellectual Property -- Patents & Copyrights

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1. Given Name (First Name)
Matthias

2. Surname (Last Name)
Haas

3. Date
02-June-2020

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Corresponding Author's Name
Patrick Asbach

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