Date: <u>August 9th, 2021</u> Name: <u>Peter Grieco</u>

Manuscript Title: Importance of bitewing radiographs for the early detection of interproximal carious

lesions and the impact on healthcare expenditure in Japan

Manuscript number (if known): ATM-21-2197-R2

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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		Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution) planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	_xNone	
3	Grants or contracts from any entity (if not indicated in item #1 above). Royalties or licenses	Time frame: pastx_Nonex_None	36 months
4	Consulting fees	xNone	

5	Payment or honoraria for	xNone	
	lectures, presentations, speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	xNone	
	testimony		
7	Support for attending meetings and/or travel	xNone	
	Detects planted issued as	u Nana	
8	Patents planned, issued or pending	xNone	
	pending		
9	Participation on a Data	x None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	xNone	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	xNone	
	·		
12	Receipt of equipment,	xNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	x None	
13	financial interests		
Plea	ise summarize the above co	nflict of interest in the fo	ollowing box:

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

Date: Aug	gust 9 2021
Your Name:_As	hiana Jivraj
Manuscript Titl	e: Importance of bitewing radiographs for the early detection of interproximal carious
lesions and the	e impact on healthcare expenditure in Japan
Manuscript nur	nber (if known): ATM-21-2197-R2

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		Time frame: Since the initial	planning of the work
1	All support for the present manuscript (e.g., funding,	xNone	
	provision of study materials,		
	medical writing, article		
	processing charges, etc.) No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	_xNone	30 months
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	_xNone	
4	Consulting fees	x None	
-	Consulting ICCs		

6	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert testimony	xNone	
7	Support for attending meetings and/or travel	xNone	
8	Patents planned, issued or pending	xNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	x_None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	xNone	
11	Stock or stock options	x_None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	x_None	
13	Other financial or non- financial interests	xNone	
Plea	ise summarize the above co	nflict of interest in the	following box:

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

Date:8/9/2021		
Your Name:John D. Da Silva		
Manuscript Title: Importance of bitewing radiographs for the early detection of interproximal carious		
lesions and the impact on healthcare expenditure in Japan		
Manuscript number (if known): ATM-21-2197-R2		

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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	X_None	
3	Royalties or licenses	X_None	
4	Consulting fees	X_None	

5	Payment or honoraria for	_XNone	
	lectures, presentations, speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	_XNone	
	testimony		
7	Support for attending	_XNone	
,	meetings and/or travel		
8	Patents planned, issued or	_XNone	
	pending		
9	Participation on a Data	X None	
9	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	_XNone	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid	V. None	
11	Stock or stock options	_XNone	
12	Receipt of equipment,	_XNone	
	materials, drugs, medical		
	writing, gifts or other		
12	services	V N	
13	Other financial or non- financial interests	_XNone	
	illialiciai iliterests		
Plea	se summarize the above co	nflict of interest in the fol	lowing box:

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

Date:_	8/9/2021	
YourNa	me:Yukinori Kuwajima	_
Manus	cript Title: Importance of bitewing radiographs for the early detection of interproximal cario	us
lesion	s and the impact on healthcare expenditure in Japan	
Manus	cript number (if known): ATM-21-2197-R2	

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1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	X_ None	
3	Grants or contracts from any entity (if not indicated in item #1 above). Royalties or licenses	X None X None	36 months
4	Consulting fees	<u>X</u> None	

5	Payment or honoraria for	<u>X</u> None	
	lectures, presentations,		
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert	X None	
	testimony		
7	Support for attending meetings and/or travel	<u>X</u> None	
8	Patents planned, issued or	<u>X</u> None	
	pending		
9	Participation on a Data	X None	
9	Participation on a Data Safety Monitoring Board or	_ <u>A</u> None	
	Advisory Board		
10	Leadership or fiduciary role	X None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	<u>X</u> None	
12	Descipt of aguinment	X None	
12	Receipt of equipment, materials, drugs, medical	<u>X</u> None	
	writing, gifts or other		
	services		
13	Other financial or non-	<u>X</u> None	
	financial interests		
Plea	se summarize the above co	nflict of interest in the fo	llowing box:

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

Date:	<u>8/9/</u>	<u> </u>
Your Name	:	Yoshiki Ishida
Manuscript	Title <u>:</u>	Importance of bitewing radiographs for the early detection of interproximal carious
lesions and	d the in	mpact on healthcare expenditure in Japan
Manuscript	t numb	per (if known): ATM-21-2197-R2

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1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	X_None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	_X_None	
3	Royalties or licenses	_X_None	
4	Consulting fees	_X_None	

5	Payment or honoraria for	_X_None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	X None	
О	testimony	_X_None	
	testimony		
7	Support for attending	X None	
/	meetings and/or travel	<u>X</u> None	
8	Patents planned, issued or	_X_None	
	pending		
9	Participation on a Data	_X_None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	_X_None	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	X None	
		<u></u>	
12	Receipt of equipment,	_X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	_X_None	
	financial interests		

Please summarize the above conflict of interest in the following box:

I declare no conflicts of interest associated with this manuscript.		

Please place an "X" next to the following statement to indicate your agreement:

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

Date:_8/9/2021
Your Name:_Kaho Ogawa
Manuscript Title: Importance of bitewing radiographs for the early detection of interproximal carious
lesions and the impact on healthcare expenditure in Japan
Manuscript number (if known): ATM-21-2197-R2

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1	All support for the present	XNone	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	XNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for lectures, presentations, speakers bureaus,	XNone	
	manuscript writing or educational events		
6	Payment for expert testimony	XNone	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data	XNone	
	Safety Monitoring Board or Advisory Board		
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	XNone	
13	Other financial or non- financial interests	XNone	
	nse summarize the above co		

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

Date:	_8/9/21	•				
Your Name	e:	Hiroe Ohyama				
Manuscrip	t Title <u>:</u> _	Importance of bitewir	ng radiographs for the ear	ly detection of	f interproximal	carious
lesions ar	nd the in	mpact on healthcare ex	penditure in Japan			
Manuscrip	t numb	er (if known <u>): ATM-21-</u>	2197-R2			

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3	Grants or contracts from any entity (if not indicated in item #1 above). Royalties or licenses	None None None	36 months
4	Consulting fees	None	

5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
7	Support for attending meetings and/or travel	None	
0	Datanta planned issued or	None	
8	Patents planned, issued or pending	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	None	
	Stock of Stock options		
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other		
12	services Other financial or non-	Nene	
13	financial interests	None	
	illianciai iliterests		
Plea	se summarize the above co	nflict of interest in the fo	llowing box:
1			

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

Date: <u>August 9th, 2021</u> Name: <u>Shigemi Nagai</u>

Manuscript Title: Importance of bitewing radiographs for the early detection of interproximal carious

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Manuscript number (if known): ATM-21-2197-R2

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			0 10 11 10 1
		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
		none (add rows as	,
		needed)	
		Time frame: Since the initial	planning of the work
1	All support for the present	_xNone	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	xNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	xNone	
4	Consulting fees	xNone	

5	Payment or honoraria for	xNone	
	lectures, presentations, speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	xNone	
	testimony		
7	Support for attending meetings and/or travel	xNone	
	Detects planted issued as	u Nana	
8	Patents planned, issued or pending	xNone	
	pending		
9	Participation on a Data	x None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	xNone	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	xNone	
	·		
12	Receipt of equipment,	xNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	x None	
	financial interests		
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