Date: April. 27", 2021
Your Name: Callum Betteridge
Manuscript Title: Objective falls-risk prediction using wearable technologies amongst patients with and without
neurogenic gait alterations: A narrative review of clinical feasibility.
Manuscript number (if known):

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.	_X_None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
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	X None		
'	meetings and/or travel			
	meetings and/or traver			
8	Patents planned, issued or	XNone		
	pending			
9	Participation on a Data	XNone		
	Safety Monitoring Board or			
_	Advisory Board			
10	Leadership or fiduciary role in other board, society,	XNone		
	committee or advocacy			
	group, paid or unpaid			
11		X None		
11	Stock or stock options			
12	Receipt of equipment,	X_None		
12	materials, drugs, medical	X_NOTIC		
	writing, gifts or other			
	services			
13	Other financial or non-	X None		
13	financial interests			
Plea	Please summarize the above conflict of interest in the following box:			
	lone.			

Date: April. 27", 2021
Your Name: Pragadesh Natarajan
Manuscript Title: Objective falls-risk prediction using wearable technologies amongst patients with and without
neurogenic gait alterations: A narrative review of clinical feasibility.
Manuscript number (if known):

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	testimony				
7	Support for attending meetings and/or travel	XNone			
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12	Receipt of equipment,	X_None			
	materials, drugs, medical				
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	services				
13	Other financial or non-	X None			
	financial interests				
Plea	Please summarize the above conflict of interest in the following box:				
l N	None.				

Date: A	۹pril.	27 th ,	2021
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Your Name: R. Dineth Fonseka

Manuscript Title: Objective falls-risk prediction using wearable technologies amongst patients with and without

neurogenic gait alterations: A narrative review of clinical feasibility.

Manuscript number (if known):_____

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13	Other financial or non-	X None		
13	financial interests			
Plea	Please summarize the above conflict of interest in the following box:			
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Date: April. 27 th , 2021
Your Name: Daniel Ho
Manuscript Title: Objective falls-risk prediction using wearable technologies amongst patients with and withou
neurogenic gait alterations: A narrative review of clinical feasibility.

Manuscript number (if known):_____

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11	Stock or stock options			
12	Receipt of equipment,	X_None		
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13	Other financial or non-	X None		
13	financial interests			
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Date: April. 27 th , 2021	
Your Name: Ralph J Mobbs	
Manuscript Title: Objective falls-risk prediction using wearable technologies amongst pat	ients with and without
neurogenic gait alterations: A narrative review of clinical feasibility.	
Manuscript number (if known):	

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Date: April. 27 th , 2021
Your Name: Wen Jie Choy
Manuscript Title: Objective falls-risk prediction using wearable technologies amongst patients with and without
neurogenic gait alterations: A narrative review of clinical feasibility.
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