Date:	12/1/2023
Your Name:	_Saeed Jerban
Manuscript Title:	Fast dual-echo ultrashort echo time (UTE) MRI can estimate apparent long T2
fraction in tibialis	s tendons and assess osteoporosis-related differences in women
Manuscript numl	per (if known): QIMS-23-1341

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		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
	Ti	me frame: Since the initia	l 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).	x_None	

3	Royalties or licenses	xNone	
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	
	testimony		
7	Support for attending meetings and/or travel	x_None	
	, c		
8	Patents planned, issued or pending	_xNone	
	or pending		
9	Participation on a Data	x_None	
	Safety Monitoring Board or Advisory Board		
10	Leadership or fiduciary	_xNone	
	role 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-	GE Healthcare	
	financial interests		

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collection, analysis, interpretation of data, the writing of this article or the decision to submit it for
publication.

Please place an "	"X" next to the following statement to indicate your agreement:
_ Saeed Jerban _ of the questions of form.	_ I certify that I have answered every question and have not altered the wording of any on this

Date:	_12/1/2023
Your Name:	Dina Moazamian
Manuscript Title	e: Fast dual-echo ultrashort echo time (UTE) MRI can estimate apparent long T2
fraction in tibial	is tendons and assess osteoporosis-related differences in women
Manuscript nun	nber (if known): QIMS-23-1341

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		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
	Ti	me frame: Since the initia	l 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	x_None	

	in item #1 above).		
3	Royalties or licenses	x None	
	Troyames or meerices	<u></u>	
4	Consulting fees	X None	
4	Consulting lees	A_None	
_			
5	Payment or honoraria for	x_None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	x_None	
	testimony		
7	Support for attending	x_None	
	meetings and/or travel		
8	Patents planned, issued	x None	
	or pending	XNone	
	or pending		
9	Participation on a Data	x None	
9	Safety Monitoring Board	XNone	
	or Advisory Board		
10	<u> </u>	y Name	
10	Leadership or fiduciary	_xNone	
	role in other board,		
	society, committee or		
	advocacy group, paid or		
4.4	unpaid	Name	
11	Stock or stock options	_xNone	
10	D	NI.	
12	Receipt of equipment,	_xNone	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non- financial interests	GE Healthcare	

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

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

Date:	_12/1/2023				
Your Name:	Yajun Ma				
Manuscript Title	: Fast dual-ech	o ultrashort echo	time (UTE) M	IRI can estima	ate apparent long T2
fraction in tibiali	s tendons and as	sess osteoporos	is-related diff	erences in w	<u>omen</u>
Manuscript num	ber (if known):	QIMS-23-134	1		

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		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
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		Time frame: past	36 months
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3	Royalties or licenses	xNone	
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	
	testimony		
7	Support for attending meetings and/or travel	x_None	
	, c		
8	Patents planned, issued or pending	_xNone	
	or pending		
9	Participation on a Data	x_None	
	Safety Monitoring Board or Advisory Board		
10	Leadership or fiduciary	_xNone	
	role 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-	GE Healthcare	
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collection, analysis, interpretation of data, the writing of this article or the decision to submit it for
publication.

Please place an "X" next to the following statement to indicate your agreement:		
_ Yajun Ma _ I certify that I have answered every question and have not altered the wording of any of questions on this form.		

Date:	12/1/2023
Your Name:	_ Amir Masoud Afsahi
Manuscript Title:	Fast dual-echo ultrashort echo time (UTE) MRI can estimate apparent long T2
fraction in tibialis	tendons and assess osteoporosis-related differences in women
Manuscript numb	per (if known): QIMS-23-1341

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	in item #1 above).	
3	Royalties or licenses	x_None
4	Consulting fees	X_None
5	Payment or honoraria for	x_None
3	lectures, presentations,	X_INOTIE
	speakers bureaus,	
	manuscript writing or	
	educational events	
6	Payment for expert	x_None
	testimony	
7	Support for attending	_x_None
,	meetings and/or travel	
	Ü	
8	Patents planned, issued	_xNone
	or pending	
9	Participation on a Data	x_None
	Safety Monitoring Board or Advisory Board	
10	Leadership or fiduciary	x None
	role in other board,	
	society, committee or	
	advocacy group, paid or	
11	unpaid Stock or stock options	_xNone
11	Stock of Stock options	_xNone
12	Receipt of equipment,	_xNone
	materials, drugs, medical	
	writing, gifts or other services	
13	Other financial or non- financial interests	GE Healthcare

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:	12/1/2023
Your Name:	_ Sophia Dwek
•	Fast dual-echo ultrashort echo time (UTE) MRI can estimate apparent long T2 stendons and assess osteoporosis-related differences in women
Manuscript num	ber (if known): QIMS-23-1341

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		Time frame: past	36 months
2	Grants or contracts from	x_None	

	any entity (if not indicated in item #1 above).		
3	Royalties or licenses	x_None	
4	Consulting fees	X_None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	x_None	
6	Payment for expert testimony	x_None	
7	Support for attending meetings and/or travel	_x_None	
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	_xNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	_xNone	
13	Other financial or non- financial interests	GE Healthcare	

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_ Sophia Dwek I certify that I have answered every question and have not altered the wording of an of the questions on this form.				

Date:	_12/1/2023
Your Name:	Jiyo Athertya
Manuscript Title	: Fast dual-echo ultrashort echo time (UTE) MRI can estimate apparent long T2
fraction in tibiali	s tendons and assess osteoporosis-related differences in women
Manuscript num	ber (if known): QIMS-23-1341

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		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
	Ti	me frame: Since the initia	l 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	x_None	

	in item #1 above).		
3	Royalties or licenses	x None	
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4	Consulting fees	X None	
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5	Payment or honoraria for	x_None	
	lectures, presentations, speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	x_None	
	testimony		
7	Support for attending	x_None	
	meetings and/or travel		
8	Patents planned, issued	x None	
	or pending	XNone	
	or pending		
9	Participation on a Data	x None	
9	Safety Monitoring Board	XNone	
	or Advisory Board		
10	<u> </u>	y Name	
10	Leadership or fiduciary	_xNone	
	role in other board,		
	society, committee or		
	advocacy group, paid or		
4.4	unpaid	Name	
11	Stock or stock options	_xNone	
10	D	NI.	
12	Receipt of equipment,	_xNone	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non- financial interests	GE Healthcare	

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

_		/0000					
	Pate:12/1/2023						
Yo	/our Name: Bhavsimran Malhi						
fra	ction in tibialis tend		echo time (UTE) MRI can estimate apparent lon sis-related differences in women 41	g <u>T2</u>			
tha	at are		close all relationships/activities/interests listed				
rela thi		of your manuscript. "Relate	d" means any relation with for-profit or not-for	-profit			
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to '	transparency and c	does not necessarily indicate nterest, it is preferable that y	e a bias. If you are in doubt about whether to lis	st a			
cui ma	The following questions apply to the author's relationships/activities/interests as they relate to the current manuscript only. The author's relationships/activities/interests should be defined broadly . For example, if your manuscript						
pe to	pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.						
oth	In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.						
		Name all entities with	Specifications/Comments				
	whom you have this relationship or indicate none (add rows as needed) (e.g., if payments were made to you or to your institution)						
		Time frame: Since the initia	l planning of the work				
	All support for the present manuscript (efunding, provision of study materials, medians)	ical					
	writing, article proces charges, etc.)	ssing					

Time frame: past 36 months

_x__None

No time limit for this

Grants or contracts from

any entity (if not indicated

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	in item #1 above).		
3	Royalties or licenses	x None	
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4	Consulting fees	X None	
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5	Payment or honoraria for	x_None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	x_None	
	testimony		
7	Support for attending	x_None	
	meetings and/or travel		
8	Patents planned, issued	x None	
	or pending	XNone	
	or pending		
9	Participation on a Data	x None	
9	Safety Monitoring Board	XNone	
	or Advisory Board		
10	<u> </u>	y Name	
10	Leadership or fiduciary	_xNone	
	role in other board,		
	society, committee or		
	advocacy group, paid or		
4.4	unpaid	Name	
11	Stock or stock options	_xNone	
10	D	NI.	
12	Receipt of equipment,	_xNone	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non- financial interests	GE Healthcare	

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_ Bhavsimran Malhi I certify that I have answered every question and have not altered the wording of

form.

any of the questions on this

Dat	te:12/1/202	3		
		seok Jang		
	,	J	o time (UTE) MRI can estimate apparent long T	2
	-		sis-related differences in women	_
		own): QIMS-23-13		
	the interest of transparent	ency, we ask you to disc	close all relationships/activities/interests listed	below
rela thir	_	our manuscript. "Relate	d" means any relation with for-profit or not-for	-profit
-	rties whose interests m mmitment	ay be affected by the co	ntent of the manuscript. Disclosure represents	a
to t	transparency and does	not necessarily indicate est, it is preferable that y	e a bias. If you are in doubt about whether to listou do so.	st a
<u>cur</u>	e following questions a rent nuscript only.	pply to the author's rela	tionships/activities/interests as they relate to th	ne
	e author's relationships rtains	s/activities/interests sho	uld be <u>defined broadly</u> . For example, if your ma	nuscript
		· -	leclare all relationships with manufacturers of on is not mentioned in the manuscript.	
oth	In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.			
		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)		
		ime frame: Since the initia	planning of the work	
	All support for the	x_None		
	present manuscript (e.g., funding, provision of			
	study materials, medical			
	writing, article processing			
	charges, etc.)			
	No time limit for this			

Time frame: past 36 months

_x__None

item.

Grants or contracts from

any entity (if not indicated

	in item #1 above).		
3	Royalties or licenses	x None	
	Troyames or meerices	<u></u>	
4	Consulting fees	X None	
4	Consulting lees	A_None	
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5	Payment or honoraria for	x_None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	x_None	
	testimony		
7	Support for attending	x_None	
	meetings and/or travel		
8	Patents planned, issued	x None	
	or pending	XNone	
	or pending		
9	Participation on a Data	x None	
9	Safety Monitoring Board	XNone	
	or Advisory Board		
10	<u> </u>	y Name	
10	Leadership or fiduciary	_xNone	
	role in other board,		
	society, committee or		
	advocacy group, paid or		
4.4	unpaid	Name	
11	Stock or stock options	_xNone	
10	D	NI.	
12	Receipt of equipment,	_xNone	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non- financial interests	GE Healthcare	

Please place an "X" next to the following statement to indicate your agreement:
_ Hyungseok Jang I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Yo	our Name: Gina W	oods		_			
	Manuscript Title: Fast dual-echo ultrashort echo time (UTE) MRI can estimate apparent long T2						
fra	raction in tibialis tendons and assess osteoporosis-related differences in women						
Ma	Manuscript number (if known): QIMS-23-1341						
		•					
	the interest of transpare at are	ency, we ask you to disc	close all relationships/activities/interests listed	below			
rel thi	_	our manuscript. "Relate	d" means any relation with for-profit or not-for-	-profit			
-	rties whose interests m mmitment	ay be affected by the co	ontent of the manuscript. Disclosure represents	a			
to	transparency and does	not necessarily indicate	e a bias. If you are in doubt about whether to lis	st a			
rel	ationship/activity/intere	est, it is preferable that y	ou do so.				
Th	e following questions a	pply to the author's rela	tionships/activities/interests as they relate to the	ne			
<u>cu</u>	rrent						
<u>ma</u>	anuscript only.						
	-	/activities/interests sho	uld be defined broadly. For example, if your ma	nuscript			
•	rtains						
			declare all relationships with manufacturers of ion is not mentioned in the manuscript.				
		l support for the work re	eported in this manuscript without time limit. F	or all			
	her items,	ure is the post 26 month	•				
tne	e time frame for disclos	ure is the past 36 month	is.				
		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)					
	T	ime frame: Since the initia	l planning of the work				
	All support for the	x_None					
	present manuscript (e.g.,						
	funding, provision of						
	study materials, medical						
	writing, article processing						
	charges, etc.)						
	No time limit for this						

Time frame: past 36 months

_x__None

Date:_____12/1/2023_

item.

Grants or contracts from any entity (if not indicated

in item #1 above).

3	Royalties or licenses	_x_None
4	Consulting fees	X_None
5	Payment or honoraria for lectures, presentations,	x_None
	speakers bureaus, manuscript writing or	
	educational events	
6	Payment for expert testimony	x_None
_		
7	Support for attending meetings and/or travel	x_None
8	Patents planned, issued or pending	_xNone
	or portaining	
9	Participation on a Data Safety Monitoring Board	x_None
	or Advisory Board	
10	Leadership or fiduciary	_xNone
	role 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-	GE Healthcare
	financial interests	

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collection, analysis, interpretation of data, the writing of this article or the decision to submit it for
publication.

Please place an "X" next to the following statement to indicate your agreement:
_ Gina Woods _ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date:	_12/1/2023
Your Name:	_ Christine B. Chung
•	Fast dual-echo ultrashort echo time (UTE) MRI can estimate apparent long T2
fraction in tibialis	s tendons and assess osteoporosis-related differences in women
Manuscript num	ber (if known): QIMS-23-1341

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3	Royalties or licenses	_x_None	
4	Consulting fees	X_None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	xNone	
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 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	_xNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	_xNone	
13	Other financial or non- financial interests	GE Healthcare	

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Date:	_12/1/2023
Your Name:	_ Jiang Du
•	Endons and assess osteoporosis-related differences in women
Manuscript num	ber (if known): QIMS-23-1341

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	Ti	me frame: Since the initia	l planning of the work
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2	Grants or contracts from	x_None	

	any entity (if not indicated in item #1 above).		
3	Royalties or licenses	_x_None	
4	Consulting fees	X_None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	xNone	
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 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	_xNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	_xNone	
13	Other financial or non- financial interests	GE Healthcare	

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fra	ction in tibialis tendons	and assess osteoporos	sis-related differences in women	
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<u>cu</u>	e following questions ap <u>rrent</u> anuscript only.	oply to the author's rela	tionships/activities/interests as they relate to the	
The author's relationships/activities/interests should be <u>defined broadly</u> . For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.				ipt
In otl		support for the work re	eported in this manuscript without time limit. For all	
		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)	
	Ti	me frame: Since the initia	l 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	_x_None		
	item.			
0	Ouente en enclassis for	Time frame: past	36 months	
2	Grants or contracts from	x_None		

Manuscript Title: Fast dual-echo ultrashort echo time (UTE) MRI can estimate apparent long T2

Date:_____12/1/2023_

in item #1 above).

Your Name: ____ Eric Y. Chang_

3	Royalties or licenses	_x_None
4	Consulting fees	X_None
5	Payment or honoraria for lectures, presentations,	x_None
	speakers bureaus, manuscript writing or educational events	
6	Payment for expert	x_None
	testimony	
7	Support for attending meetings and/or travel	_x_None
8	Patents planned, issued or pending	_xNone
9	Participation on a Data Safety Monitoring Board	x_None
	or Advisory Board	
10	Leadership or fiduciary role in other board,	_xNone
	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	
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