

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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#### 1. Identifying information.

#### 2. The work under consideration for publication.

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#### 4. Intellectual Property.

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

#### 5. Relationships not covered above.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Cheng-Ping

2. Surname (Last Name)  
Chien

3. Date  
07-April-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Hsiao-Wen Chung

5. Manuscript Title

Magnetic resonance cholangiopancreatography at 3T in a single breath-hold: comparative effectiveness between 3D gradient- and spin-echo and 2D thick-slab fast spin-echo acquisitions

6. Manuscript Identifying Number (if you know it)

QIMS-2020-12

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Are there any relevant conflicts of interest?  Yes  No

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Are there any relevant conflicts of interest?  Yes  No

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

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Dr. Chien has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Feng-Mao

2. Surname (Last Name)  
Chiu

3. Date  
07-April-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Hsiao-Wen Chung

5. Manuscript Title

Magnetic resonance cholangiopancreatography at 3T in a single breath-hold: comparative effectiveness between 3D gradient- and spin-echo and 2D thick-slab fast spin-echo acquisitions

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

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Employment at Philips Healthcare, Taipei, Taiwan

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Dr. Chiu reports and Employment at Philips Healthcare, Taipei, Taiwan.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Yen-Chun

2. Surname (Last Name)  
Shen

3. Date  
07-April-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Hsiao-Wen Chung

5. Manuscript Title

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### Section 1. Identifying Information

1. Given Name (First Name)  
Yi-Hsun

2. Surname (Last Name)  
Chen

3. Date  
07-April-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Hsiao-Wen Chung

5. Manuscript Title

Magnetic resonance cholangiopancreatography at 3T in a single breath-hold: comparative effectiveness between 3D gradient- and spin-echo and 2D thick-slab fast spin-echo acquisitions

6. Manuscript Identifying Number (if you know it)

QIMS-2020-12

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1. Given Name (First Name) Hsiao-Wen      2. Surname (Last Name) Chung      3. Date 07-April-2020

4. Are you the corresponding author?     Yes     No

5. Manuscript Title  
Magnetic resonance cholangiopancreatography at 3T in a single breath-hold: comparative effectiveness between 3D gradient- and spin-echo and 2D thick-slab fast spin-echo acquisitions

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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
Ministry of Science and Technology	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Research grants MOST 105-2221-E-002-142-MY3 and MOST 107-2221-E-002-038-MY3

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Are there any relevant conflicts of interest?     Yes     No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Taipei Medical University Hospital	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Educational lectures on MR physics
Tri-Service General Hospital	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Educational lectures on MR physics

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Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Chi-Mei Hospital	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Educational lectures on MR physics

### 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. Chung reports grants and personal fees from Ministry of Science and Technology, during the conduct of the study; personal fees from Taipei Medical University Hospital, personal fees from Tri-Service General Hospital, personal fees from Chi-Mei Hospital, outside the submitted work; .

### Evaluation and Feedback

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