

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Joost	2. Surname (Last Name) Verschueren	3. Date 30-September-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Edwin Oei
5. Manuscript Title T2 mapping of healthy knee cartilage: multicenter multivendor reproducibility		
6. Manuscript Identifying Number (if you know it)  		

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Dr. Verschueren has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Susanne

2. Surname (Last Name)  
Eijgenraam

3. Date  
30-September-2020

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name  
Edwin Oei

5. Manuscript Title  
T2 mapping of healthy knee cartilage: multicenter multivendor reproducibility

6. Manuscript Identifying Number (if you know it)

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Dr. Eijgenraam has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Stefan

2. Surname (Last Name)  
Klein

3. Date  
30-September-2020

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name  
Edwin Oei

5. Manuscript Title  
T2 mapping of healthy knee cartilage: multicenter multivendor reproducibility

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Dr. Klein has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name) Dirk	2. Surname (Last Name) Poot	3. Date 30-September-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Edwin Oei
5. Manuscript Title T2 mapping of healthy knee cartilage: multicenter multivendor reproducibility		
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1. Given Name (First Name)  
Sita

2. Surname (Last Name)  
Bierma-Zeinstra

3. Date  
30-September-2020

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☐ Yes ☒ No

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Dr. Bierma-Zeinstra has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Juan

2. Surname (Last Name)

Hernandez-Tamamez

3. Date

30-September-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Edwin Oei

5. Manuscript Title

T2 mapping of healthy knee cartilage: multicenter multivendor reproducibility

6. Manuscript Identifying Number (if you know it)

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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. Hernandez-Tamamez has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name)  
Piotr

2. Surname (Last Name)  
Wielopolski

3. Date  
30-September-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name  
Edwin Oei

5. Manuscript Title  
T2 mapping of healthy knee cartilage: multicenter multivendor reproducibility

6. Manuscript Identifying Number (if you know it)

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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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### Section 1. Identifying Information

1. Given Name (First Name)

Max

2. Surname (Last Name)

Reijman

3. Date

30-September-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Edwin Oei

5. Manuscript Title

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Edwin

2. Surname (Last Name)  
Oei

3. Date  
30-September-2020

4. Are you the corresponding author? ☒ Yes ☐ No

5. Manuscript Title  
T2 mapping of healthy knee cartilage: multicenter multivendor reproducibility

6. Manuscript Identifying Number (if you know it)

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