

ICMJE DISCLOSURE FORM

Date: March 2nd, 2022

Your Name: Peter Sang Uk Park

Manuscript Title: Application of ¹⁸F-NaF-PET/CT in assessing age-related changes in the cervical spine

Manuscript number (if known): QIMS-21-1174-R1

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.

The following questions apply to the author's relationships/activities/interests as they relate to the current manuscript only.

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3	Royalties or licenses	None	
4	Consulting fees	None	

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

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

None

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.

ICMJE DISCLOSURE FORM

Date: March 2, 2022

Your Name: William Raynor

Manuscript Title: Application of 18F-NaF-PET/CT in assessing age-related changes in the cervical spine of healthy adults

Manuscript number: QIMS-21-1174

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3	Royalties or licenses	<input checked="" type="checkbox"/> None	
4	Consulting fees	<input checked="" type="checkbox"/> None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<u> X </u> None	
6	Payment for expert testimony	<u> X </u> None	
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ICMJE DISCLOSURE FORM

Date: March 3rd, 2022

Your Name: Navpreet Khurana

Manuscript Title: Application of 18F-NaF-PET/CT in assessing age-related changes in the cervical spine of healthy adults

Manuscript number (if known): QIMS-21-1174

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Time frame: past 36 months			
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3	Royalties or licenses	<input checked="" type="checkbox"/> None	
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5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<u> X </u> None	
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ICMJE DISCLOSURE FORM

Date: March 2, 2022

Your Name: Yusha Sun

Manuscript Title: Application of 18F-NaF-PET/CT in assessing age-related changes in the cervical spine of healthy adults

Manuscript number (if known): QIMS-21-1174

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3	Royalties or licenses	<u>__X__</u> None	
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ICMJE DISCLOSURE FORM

Date: March 20th 2022

Your Name: Thomas J. Werner

Manuscript Title: Application of 18F-NaF-PET/CT in assessing age-related changes in the cervical spine of healthy adults

Manuscript number (if known): QIMS-21-1174

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ICMJE DISCLOSURE FORM

Date: 3 March 2022_____

Your Name: Poul Flemming Højilund-Carlsen _____

Manuscript Title: Application of ¹⁸F-NaF-PET/CT in assessing age-related changes in the cervical spine _____

Manuscript number (if known): QIMS-21-1174 _____

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ICMJE DISCLOSURE FORM

Date: Feb 25th, 2020

Your Name: Abass Alavi

Manuscript Title: Application of ¹⁸F-NaF-PET/CT in assessing age-related changes in the cervical spine

Manuscript number (if known): QIMS-21-1174-R1

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ICMJE DISCLOSURE FORM

Date: March 2nd 2022

Your Name: Mona-Elisabeth Revheim

Manuscript Title: Application of 18F-NaF-PET/CT in assessing age-related changes in the cervical spine of healthy adults

Manuscript number (if known): QIMS-21-1174

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