Date:	04/19/2022
Your Name:	Ya-Jun Ma
Manuscript Ti	itle: Improving the Understanding and Performance of Clinical MRI using Tissue Property Filters (TP-
filters) and th	e Central Contrast Theorem, MASDIR (Multiplied, Added, Subtracted and/or Divided Inversion Recovery
Pulse Sequen	ces and Synergistic Contrast MRI (scMRI)
Manuscript n	umber (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	Specifications/Comments (e.g., if payments were made to you or to your institution)
		needed)	
		Time frame: Since the initial	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.	XNone	
		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	_ <b>X</b> None	

5	Payment or honoraria for	X None	
	lectures, presentations,	_XNone	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	_ <b>X</b> None	
	testimony		
7	Support for attending	<b>X</b> None	
	meetings and/or travel		
•		<b>v</b>	
8	Patents planned, issued or pending	_ <b>X</b> None	
	pending		
9	Participation on a Data	<b>X</b> None	
	Safety Monitoring Board or	_ XNone	
	Advisory Board		
10	Leadership or fiduciary role	<b>X</b> None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	<b>X</b> None	
12	Receipt of equipment,	X None	
12	materials, drugs, medical	<b>X</b> None	
	writing, gifts or other		
	services		
13	Other financial or non-	<b>X</b> None	
	financial interests		
		<b>.</b>	
PIE	ease summarize the above c	onflict of interest in the fo	llowing box:
	No conflict of interest		
	No connect of interest		
Ple	ease place an "X" next to the	e following statement to ir	dicate 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:	04/19/2022
Your Name:	Dina Moazamian
Manuscript Ti	itle: Improving the Understanding and Performance of Clinical MRI using Tissue Property Filters (TP-
filters) and th	e Central Contrast Theorem, MASDIR (Multiplied, Added, Subtracted and/or Divided Inversion Recovery
Pulse Sequen	ces and Synergistic Contrast MRI (scMRI)
Manuscript n	umber (if known):

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		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	_ <b>X</b> None	

5	Payment or honoraria for	_ <b>X</b> None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	_ <b>X</b> None	
	testimony		
7	Support for attending meetings and/or travel	<b>X</b> None	
8	Patents planned, issued or	_ <b>X</b> None	
	pending		
9	Participation on a Data	_ <b>X</b> None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	<b>X</b> None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	<b>X</b> None	
12	Receipt of equipment,	<b>X</b> None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	<b>X</b> None	
	financial interests		
	No conflict of interest	onflict of interest in the	following box:
Ple	ase place an "X" next to the	e following statement to	indicate your agreement:

 $\underline{\phantom{a}}$  X  $\underline{\phantom{a}}$  I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date:	04/19/2022
Your Name:	Daniel Cornfeld
<b>Manuscript Ti</b>	itle: Improving the Understanding and Performance of Clinical MRI using Tissue Property Filters (TP-
filters) and th	e Central Contrast Theorem, MASDIR (Multiplied, Added, Subtracted and/or Divided Inversion Recovery
Pulse Sequen	ces and Synergistic Contrast MRI (scMRI)
Manuscript n	umber (if known):

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		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	_ <b>X</b> None	

5 Pa	Payment or honoraria for	<b>X</b> None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
_	educational events	Y N	
6	Payment for expert testimony	<b>X</b> None	
	testimony		
7	Support for attending meetings and/or travel	<b>X</b> None	
	meetings and/or traver		
8	Patents planned, issued or	_ <b>X</b> None	
	pending		
0	Doublein stien on a Date		
9	Participation on a Data Safety Monitoring Board or	<b>X</b> None	
	Advisory Board		
10	Leadership or fiduciary role	<b>X</b> None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	<b>X</b> None	
12	Receipt of equipment,	<b>X</b> None	
12	materials, drugs, medical	XNone	
	writing, gifts or other		
	services		
13	Other financial or non-	<b>X</b> None	
	financial interests		
Ple	ease summarize the above c	onflict of interest in the fol	lowing box:
_			
	No conflict of interest		
L			
Ple	ase place an "X" next to the	e following statement to in	dicate your agreement:

 $\underline{\phantom{a}}$  X  $\underline{\phantom{a}}$  I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date:	04/19/2022
Your Name:	Paul Condron
Manuscript Tit	tle: Improving the Understanding and Performance of Clinical MRI using Tissue Property Filters (TP-
filters) and the	e Central Contrast Theorem, MASDIR (Multiplied, Added, Subtracted and/or Divided Inversion Recovery)
Pulse Sequenc	es and Synergistic Contrast MRI (scMRI)
Manuscript nu	ımber (if known):

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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)
			plaining of the work
1	All support for the present	<b>X</b> None	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)  No time limit for this item.		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	_ <b>X</b> None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	<b>X</b> None	
4	Consulting fees	_ <b>X</b> None	

5	Payment or honoraria for	_ <b>X</b> None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	_ <b>X</b> None	
	testimony		
7	Support for attending	<b>X</b> None	
	meetings and/or travel		
8	Patents planned, issued or	X None	
	pending		
9	Participation on a Data	<b>X</b> None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	<b>X</b> None	
10	in other board, society,	XNone	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	<b>X</b> None	
12	Receipt of equipment,	<b>X</b> None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	<b>X</b> None	
	financial interests		
Ple	ease summarize the above c	onflict of interest in the fo	llowing box:
_			
	No conflict of interest		

 $\underline{\phantom{a}}$  X  $\underline{\phantom{a}}$  I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date:	04/19/2022
Your Name <u>:</u>	Samantha J Holdsworth_
Manuscript Tit	tle: Improving the Understanding and Performance of Clinical MRI using Tissue Property Filters (TP-
filters) and the	e Central Contrast Theorem, MASDIR (Multiplied, Added, Subtracted and/or Divided Inversion Recovery)
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			plaining of the work
1	All support for the present	<b>X</b> None	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)  No time limit for this item.		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	_ <b>X</b> None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	<b>X</b> None	
4	Consulting fees	_ <b>X</b> None	

5	Payment or honoraria for		None	
	lectures, presentations,	X	<u> </u>	
	speakers bureaus,			
	manuscript writing or			
	educational events			
6	Payment for expert	Х	None	
	testimony			
	,			
7	Support for attending	Y	None	
,	meetings and/or travel	<del> ^</del> -	140110	
	meetings and, or traver			
8	Patents planned, issued or	_ X	None	
	pending			
9	Participation on a Data	_ X	None	
	Safety Monitoring Board or			
	Advisory Board			
10	Leadership or fiduciary role	X _	None	
	in other board, society,			
	committee or advocacy			
	group, paid or unpaid			
11	Stock or stock options	X _	None	
12	Receipt of equipment,	X _	None	
	materials, drugs, medical			
	writing, gifts or other			
	services			
13	Other financial or non-	X _	None	
	financial interests			
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Ple	ase summarize the above c	onflict (	of interest in the	following box:
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	No conflict of interest			

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

 $\underline{\hspace{0.1cm}}$  X  $\underline{\hspace{0.1cm}}$  I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date:	04/19/2022
Your Name:_	Mark Bydder
<b>Manuscript T</b>	itle: Improving the Understanding and Performance of Clinical MRI using Tissue Property Filters (TP-
filters) and th	e Central Contrast Theorem, MASDIR (Multiplied, Added, Subtracted and/or Divided Inversion Recovery
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		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	_ <b>X</b> None	

5	•	_ X	_None		
	lectures, presentations,				
	speakers bureaus,				
	manuscript writing or				
	educational events				
6	Payment for expert	_ X	None		
	testimony				
_					
7	Support for attending	— <b>x</b> -	None		
	meetings and/or travel				
0					
8	Patents planned, issued or	_X_	None		
	pending				
9	Participation on a Data				
9	Participation on a Data Safety Monitoring Board or	_ X	None		
	Advisory Board				
10	Leadership or fiduciary role		None		
10	in other board, society,	X_	None		
	committee or advocacy				
	group, paid or unpaid				
11	Stock or stock options	Х	None		
			<del></del>		
12	Receipt of equipment,	X _	None		
	materials, drugs, medical				
	writing, gifts or other				
4.2	services				
13	Other financial or non- financial interests	X_	None		
	illialiciai liiterests				
Ple	ase summarize the above c	onflict	of interest in th	following box:	
			o	Training waxi	
	No conflict of interest				
Ple	ase place an "X" next to the	e follow	ving statement t	o indicate your agreement:	

 $\underline{\hspace{0.1cm}}$  X  $\underline{\hspace{0.1cm}}$  I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date:	04/19/2022
Your Name:	Jiang Du
<b>Manuscript T</b>	itle: Improving the Understanding and Performance of Clinical MRI using Tissue Property Filters (TP
filters) and th	ne Central Contrast Theorem, MASDIR (Multiplied, Added, Subtracted and/or Divided Inversion Recovery
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		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	_ <b>X</b> None	

_	Daymant on here were for		
5	Payment or honoraria for lectures, presentations,	<b>X</b> None	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	_ <b>X</b> None	
	testimony		
7	Support for attending meetings and/or travel	<b>X</b> None	
8	Patents planned, issued or	<b>X</b> None	
	pending		
9	Participation on a Data	Y N	
9	Participation on a Data Safety Monitoring Board or	<b>X</b> None	
	Advisory Board		
10	Leadership or fiduciary role	<b>X</b> None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	<b>X</b> None	
12	Descint of aguinment	V Name	
12	Receipt of equipment, materials, drugs, medical	<b>X</b> None	
	writing, gifts or other		+
	services		
13	Other financial or non-	<b>X</b> None	
	financial interests		
	ease summarize the above c Jiang Du serves as an unpaid ed conflict of interest.		rollowing box: Inantitative Imaging in Medicine and Surgery. No other

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

 $\underline{\ \ }$  X  $\underline{\ \ }$  I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date:	_05/22/2022
Your Name:	Graeme M Bydder
<b>Manuscript Ti</b>	tle: Improving the Understanding and Performance of Clinical MRI using Tissue Property Filters (TP-
filters) and the	e Central Contrast Theorem, MASDIR (Multiplied, Added, Subtracted and/or Divided Inversion Recovery
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		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	_ Magnetica	

5	lectures, presentations,	_ <b>X</b> None	
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	X None	
	testimony		
7	Support for attending meetings and/or travel	<b>X</b> None	
	- -		
8	Patents planned, issued or	<b>X</b> None	
	pending		
9	Participation on a Data	V Nove	
9	Safety Monitoring Board or	<b>X</b> None	
	Advisory Board		
10	Leadership or fiduciary role	<b>X</b> None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	<b>X</b> None	
12	Receipt of equipment,	X None	
12	materials, drugs, medical	XNone	
	writing, gifts or other		
	services		
13	Other financial or non-	<b>X</b> None	
	financial interests		
Ple	ease summarize the above o	onflict of interest in the fo	lowing box:
	The author receives consulting	foos from Mognetics	
	The author receives consulting	rees from Magnetica.	
Ple	ease place an "X" next to the	e following statement to in	dicate 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.