

ICMJE DISCLOSURE FORM

Date: 11/4/2023

Your Name: Ram Gurajala

Manuscript Title: Prospective comparison of PET/MR and PET/CT dosimetry in hepatic malignant neoplastic disease after 90Y radioembolization treatment

Manuscript Number (if known): [Click or tap here to enter text.]

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 author's relationships/activities/interests should be defined broadly. 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.

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.

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

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: 11/4/2023

Your Name: Sasan Partovi

Manuscript Title: Prospective comparison of PET/MR and PET/CT dosimetry in hepatic malignant neoplastic disease after 90Y radioembolization treatment

Manuscript Number (if known): [Click or tap here to enter text.]

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ICMJE DISCLOSURE FORM

Date: 11/4/2023

Your Name: Frank P. DiFilippo

Manuscript Title: Prospective comparison of PET/MR and PET/CT dosimetry in hepatic malignant neoplastic disease after 90Y radioembolization treatment

Manuscript Number (if known): [Click or tap here to enter text.]

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Date: 11/4/2023

Your Name: Xin Li

Manuscript Title: Prospective comparison of PET/MR and PET/CT dosimetry in hepatic malignant neoplastic disease after 90Y radioembolization treatment

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Date: 11/4/2023

Your Name: Christopher Coppa

Manuscript Title: Prospective comparison of PET/MR and PET/CT dosimetry in hepatic malignant neoplastic disease after 90Y radioembolization treatment

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9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> None <table border="1"> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </table>							
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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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

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: 11/4/2023

Your Name: [Shetal N. Shah]

Manuscript Title: [Prospective comparison of PET/MR and PET/CT dosimetry in hepatic malignant neoplastic disease after 90Y radioembolization treatment]

Manuscript Number (if known): [Click or tap here to enter text.]

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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ICMJE DISCLOSURE FORM

Date: 11/4/2023

Your Name: [Karunkaravel Karuppasamy]

Manuscript Title: [Prospective comparison of PET/MR and PET/CT dosimetry in hepatic malignant neoplastic disease after 90Y radioembolization treatment]

Manuscript Number (if known): [Click or tap here to enter text.]

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ICMJE DISCLOSURE FORM

Date: 11/4/2023

Your Name: [Nancy Obuchowski]

Manuscript Title: [Prospective comparison of PET/MR and PET/CT dosimetry in hepatic malignant neoplastic disease after 90Y radioembolization treatment]

Manuscript Number (if known): [Click or tap here to enter text.]

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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ICMJE DISCLOSURE FORM

Date: 11/4/2023

Your Name: Ehsan Fayazzadeh

Manuscript Title: Prospective comparison of PET/MR and PET/CT dosimetry in hepatic malignant neoplastic disease after 90Y radioembolization treatment

Manuscript Number (if known): [Click or tap here to enter text.]

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ICMJE DISCLOSURE FORM

Date: 11/4/2023

Your Name: Gordon McLennan

Manuscript Title: Prospective comparison of PET/MR and PET/CT dosimetry in hepatic malignant neoplastic disease after 90Y radioembolization treatment

Manuscript Number (if known): [Click or tap here to enter text.]

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11	Stock or stock options	<input checked="" type="checkbox"/> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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

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: 11/4/2023

Your Name: Abraham Levitin

Manuscript Title: Prospective comparison of PET/MR and PET/CT dosimetry in hepatic malignant neoplastic disease after 90Y radioembolization treatment

Manuscript Number (if known): [Click or tap here to enter text.]

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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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.

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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.	<input checked="" type="checkbox"/> This study was partially funded by a research grant from Cleveland Clinic Foundation Imaging Institute and by a research grant from Siemens Medical Solutions, USA. <table border="1" style="width: 100%; margin-top: 5px;"> <tr><td style="width: 50%; height: 15px;"></td><td style="width: 50%; height: 15px;"></td></tr> <tr><td style="width: 50%; height: 15px;"></td><td style="width: 50%; height: 15px;"></td></tr> <tr><td colspan="2" style="text-align: center; font-size: small;">Click the tab key to add additional rows.</td></tr> </table>					Click the tab key to add additional rows.	
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