

ICMJJE DISCLOSURE FORM

Date: 03/06/24

Your Name: Kiersten Woodyard De Brito

Manuscript Title: Hierarchal Clustering for the Identification of Distinct Rib Fracture Patterns

Manuscript number (if known): CCTS-23-17-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.

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.

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Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	
5		None	

	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events		
6	Payment for expert testimony	___ None	
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Please summarize the above conflict of interest in the following box:

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: 3/10/24

[Your Name:] Kieran Phelan

[Manuscript Title:] Hierarchal Clustering for the Identification of Distinct Rib Fracture Patterns

Manuscript Number (if known): CCTS-23-17-R1

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ICMJE DISCLOSURE FORM

Date: 3/10/24

[Your Name:] Aaron Seitz

[Manuscript Title:] Hierarchal Clustering for the Identification of Distinct Rib Fracture Patterns

Manuscript Number (if known): CCTS-23-17-R1

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ICMJE DISCLOSURE FORM

Date: 3/10/24

[Your Name:] Jay Nathwani

[Manuscript Title:] Hierarchal Clustering for the Identification of Distinct Rib Fracture Patterns

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ICMJE DISCLOSURE FORM

Date: 3/7/2024

[Your Name:] Christopher Janowak

[Manuscript Title:] Hierarchal Clustering for the Identification of Distinct Rib Fracture Patterns

Manuscript Number (if known): CCTS-23-17-R1

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