ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Tomohisa
2. Surname (Last Name) Okada
3. Date 21-July-2020
4. Are you the corresponding author? ✔ Yes ☐ No

5. Manuscript Title
Repeatability of proton MRS of the brain at 7T: effect of scan time on semi-LASER and short-TE STEAM scans and their comparison
6. Manuscript Identifying Number (if you know it) QIMS-20-517

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Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?
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If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

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<tr>
<td>Hideto</td>
<td>Kuribayashi</td>
<td>08-June-2020</td>
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</table>

4. Are you the corresponding author? Yes [ ] No [X] 

Corresponding Author's Name

Tomohisa Okada

5. Manuscript Title
Repeatability of proton MRS of the brain at 7T: effect of scan time on semi-LASER and short-TE STEAM scans and their comparison

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1. Given Name (First Name)  Lana
2. Surname (Last Name)  Kaiser
3. Date  08-June-2020
4. Are you the corresponding author?  Yes ☐  No ☑

Corresponding Author’s Name  Tomohisa Okada

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Dr. Kaiser has nothing to disclose.

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1. Given Name (First Name)  
   Yuta  

2. Surname (Last Name)  
   Urushibata  

3. Date  
   08-June-2020  

4. Are you the corresponding author?  
   [ ] Yes  
   ✔ No  

Corresponding Author’s Name  
Tomohisa Okada  

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
   - Yes  
   - No  
   ✔ No
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Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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I was a Siemens Research Collaboration manager in charge of MR Spectroscopy. I retired in October 2017 and do not currently receive any salary from Siemens.

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<tr>
<td>Ravi Teja</td>
<td>Seethamraju</td>
<td>08-June-2020</td>
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4. Are you the corresponding author? □ Yes ✔ No

4.1 Corresponding Author’s Name

Tomohisa Okada

5. Manuscript Title

Repeatability of proton MRS of the brain at 7T: effect of scan time on semi-LASER and short-TE STEAM scans and their comparison

6. Manuscript Identifying Number (if you know it)

QIMS-20-517

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If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

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<td>Ahn</td>
<td>10-June-2020</td>
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4. Are you the corresponding author?  
   - Yes [ ]  
   - No [X]

5. Manuscript Title  
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Corresponding Author’s Name  
Tomohisa Okada

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1. Given Name (First Name)  
   Koji

2. Surname (Last Name)  
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4. Are you the corresponding author?  
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1. Given Name (First Name)  
   Tadashi

2. Surname (Last Name)  
   Isa

3. Date  
   10-June-2020

4. Are you the corresponding author?  
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QIMS-20-517

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Yes  ☑ No

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Dr. Isa has nothing to disclose.

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