

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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#### 1. Identifying information.

#### 2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

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#### 4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

#### 5. Relationships not covered above.

Use this section to report 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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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Kevin

2. Surname (Last Name)  
Tse Ve Koon

3. Date  
07-September-2020

4. Are you the corresponding author?  Yes  No

5. Manuscript Title  
Comparison of HR-MRI and  $\mu$ CTA for in-vivo assessment of osteoarthritis follow-up in non-human primate models

6. Manuscript Identifying Number (if you know it)  
QIMS-20-116

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Are there any relevant conflicts of interest?  Yes  No

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.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Universite Lyon 1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest?  Yes  No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

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Dr. Tse Ve Koon reports grants from Universite Lyon 1, during the conduct of the study; .

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### Section 1. Identifying Information

1. Given Name (First Name)  
Denis

2. Surname (Last Name)  
Grenier

3. Date  
07-September-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Kevin TSE VE KOON

5. Manuscript Title  
Comparison of HR-MRI and  $\mu$ CTA for in-vivo assessment of osteoarthritis follow-up in non-human primate models

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Dr. Grenier has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Fabrice

2. Surname (Last Name)  
Taborik

3. Date  
07-September-2020

4. Are you the corresponding author?  Yes  No  
Corresponding Author's Name  
Kevin TSE VE KOON

5. Manuscript Title  
Comparison of HR-MRI and  $\mu$ CTA for in-vivo assessment of osteoarthritis follow-up in non-human primate models

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European Comission - Eurostars co-funding	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Anne-Laure	2. Surname (Last Name) PERRIER	3. Date 07-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Kevin TSE VE KOON
5. Manuscript Title Comparison of HR-MRI and $\mu$ CTA for in-vivo assessment of osteoarthritis follow-up in non-human primate models		
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Dr. PERRIER has nothing to disclose.

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1. Given Name (First Name)

Laurent

2. Surname (Last Name)

Mahieu-Williame

3. Date

07-September-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

Kevin TSE VE KOON

5. Manuscript Title

Comparison of HR-MRI and  $\mu$ CTA for in-vivo assessment of osteoarthritis follow-up in non-human primate models

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Dr. Mahieu-Williame has nothing to disclose.

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#### 4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

#### 5. Relationships not covered above.

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**Non-Financial Support:** Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

**Other:** Anything not covered under the previous three boxes

**Pending:** The patent has been filed but not issued

**Issued:** The patent has been issued by the agency

**Licensed:** The patent has been licensed to an entity, whether earning royalties or not

**Royalties:** Funds are coming in to you or your institution due to your patent

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Luc

2. Surname (Last Name)  
MAGNIER

3. Date  
07-September-2020

4. Are you the corresponding author?  Yes  No  
Corresponding Author's Name  
Kevin TSE VE KOON

5. Manuscript Title  
Comparison of HR-MRI and  $\mu$ CTA for in-vivo assessment of osteoarthritis follow-up in non-human primate models

6. Manuscript Identifying Number (if you know it)  
QIMS-20-116

### 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.)?

Are there any relevant conflicts of interest?  Yes  No

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.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
European Comission - Eurostars co-funding	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Support for travel to meetings for the study and administrative support

### Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were **present during the 36 months prior to publication**.

Are there any relevant conflicts of interest?  Yes  No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Voxcan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Employment
European Commission or French Research Ministry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Grant to the institution

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

### Section 5. Relationships not covered above

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- Yes, the following relationships/conditions/circumstances are present (explain below):
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Dr. MAGNIER reports grants from European Commission - Eurostars co-funding, during the conduct of the study; other from Voxcan, from European Commission or French Research Ministry, outside the submitted work; .

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Thomas	2. Surname (Last Name) Chuzel	3. Date 07-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Kevin TSE VE KOON
5. Manuscript Title Comparison of HR-MRI and $\mu$ CTA for in-vivo assessment of osteoarthritis follow-up in non-human primate models		
6. Manuscript Identifying Number (if you know it) QIMS-20-116		

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Are there any relevant conflicts of interest?  Yes  No

### Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest?  Yes  No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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### Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Chuzel has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Hugues

2. Surname (Last Name)  
Contamin

3. Date  
07-September-2020

4. Are you the corresponding author?  Yes  No  
Corresponding Author's Name  
Kevin TSE VE KOON

5. Manuscript Title  
Comparison of HR-MRI and  $\mu$ CTA for in-vivo assessment of osteoarthritis follow-up in non-human primate models

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European Comission - Eurostars co-funding	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Are there any relevant conflicts of interest?  Yes  No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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**Royalties:** Funds are coming in to you or your institution due to your patent

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Emmanuel	2. Surname (Last Name) CHEREUL	3. Date 07-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Kevin TSE VE KOON
5. Manuscript Title Comparison of HR-MRI and $\mu$ CTA for in-vivo assessment of osteoarthritis follow-up in non-human primate models		
6. Manuscript Identifying Number (if you know it) QIMS-20-116		

### 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.)?

Are there any relevant conflicts of interest?  Yes  No

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.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
European Comission - Eurostars co-funding	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Voxcan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Employment
European Commission or French Research Ministry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Grant to the institution
National Veterinary School of Lyon - Vetagro-sup	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Payment for development of educational presentations

## ICMJE Form for Disclosure of Potential Conflicts of Interest

---

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

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Voxcan is a CRO who sells preclinical studies in the domain of osteoarthritis to its clients.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Olivier

2. Surname (Last Name)  
BEUF

3. Date  
07-September-2020

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Corresponding Author's Name  
Kevin TSE VE KOON

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Are there any relevant conflicts of interest?  Yes  No

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Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Université Lyon 1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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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?

- Yes, the following relationships/conditions/circumstances are present (explain below):
- No other relationships/conditions/circumstances that present a potential conflict of interest

At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

### Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. BEUF reports grants from Université Lyon 1, during the conduct of the study; .

### Evaluation and Feedback

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