Date:	10/12/2022
Your Name:	Adnan Mujanovic
Manuscript Title:	Association of intravenous thrombolysis and pre-interventional reperfusion: a post-hoc analysis of the SWIFT DIRECT trial
Manuscript Number (if known):	jnis-2022-019585.R1

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		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		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.	None	Click the tab key to add additional rows.
		Time frame: past 36 months	s
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None None	

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None None	
6	Payment for expert testimony	⊠ None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	⊠ None	

			entities with whom you have this hip or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
11	Stock or stock options	No No	ne	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	No	ne	
13	Other financial or non-financial interests	No No	ne	
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.				

Date:	10/12/2022
Your Name:	Anastasios Mpotsaris
Manuscript Title:	Association of intravenous thrombolysis and pre-interventional reperfusion: a post-hoc analysis of the SWIFT DIRECT trial
Manuscript Number (if known):	jnis-2022-019585.R1

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2	Grants or contracts from any entity (if not indicated in item #1 above).	⊠ None	
3	Royalties or licenses	None None	

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4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None None	
6	Payment for expert testimony	⊠ None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	⊠ None	

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11	Stock or stock options	No No	ne	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	No	ne	
13	Other financial or non-financial interests	No No	ne	
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.				

Date:	10/12/2022
Your Name:	Aude Triquenot
Manuscript Title:	Association of intravenous thrombolysis and pre-interventional reperfusion: a post-hoc analysis of the SWIFT DIRECT trial
Manuscript Number (if known):	jnis-2022-019585.R1

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3	Royalties or licenses	None None	

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4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None None	
6	Payment for expert testimony	⊠ None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	⊠ None	

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11	Stock or stock options	No No	ne	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	No	ne	
13	Other financial or non-financial interests	No No	ne	
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.				

Date:	10/12/2022
Your Name:	Benjamin Gory
Manuscript Title:	Association of intravenous thrombolysis and pre-interventional reperfusion: a post-hoc analysis of the SWIFT DIRECT trial
Manuscript Number (if known):	jnis-2022-019585.R1

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

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None None	
6	Payment for expert testimony	⊠ None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	⊠ None	

			entities with whom you have this hip or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
11	Stock or stock options	No No	ne	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	No	ne	
13	Other financial or non-financial interests	No No	ne	
Plea]⊠[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.			

Date:	10/12/2022
Your Name:	Cécile Preterre
Manuscript Title:	Association of intravenous thrombolysis and pre-interventional reperfusion: a post-hoc analysis of the SWIFT DIRECT trial
Manuscript Number (if known):	jnis-2022-019585.R1

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		Time frame: past 36 month	s	
2	Grants or contracts from any entity (if not indicated in item #1 above).	⊠ None		
3	Royalties or licenses	None None		

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None None	
6	Payment for expert testimony	⊠ None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	⊠ None	

			entities with whom you have this hip or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
11	Stock or stock options	No No	ne	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	No	ne	
13	Other financial or non-financial interests	No No	ne	
Plea]⊠[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.			

Date:	10/12/2022
Your Name:	Daniel Strbian
Manuscript Title:	Association of intravenous thrombolysis and pre-interventional reperfusion: a post-hoc analysis of the SWIFT DIRECT trial
Manuscript Number (if known):	inis-2022-019585.R1

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		Time frame: past 36 month	s
2	Grants or contracts from any entity (if not indicated in item #1 above).	⊠ None	
3	Royalties or licenses	None None	

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None None	
6	Payment for expert testimony	⊠ None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	⊠ None	

			entities with whom you have this hip or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
11	Stock or stock options	No No	ne	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	No	ne	
13	Other financial or non-financial interests	No No	ne	
Plea]⊠[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.			

Date:	10/12/2022	
Your Name:	David S Liebeskind	
Manuscript Title:	Association of intravenous thrombolysis and pre-interventional reperfusion: a post-hoc analysis of the SWIFT DIRECT trial	
Manuscript Number (if known):	jnis-2022-019585.R1	

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		Time frame: past 36 month	s
2	Grants or contracts from any entity (if not indicated in item #1 above).	⊠ None	
3	Royalties or licenses	None None	

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
4	Consulting fees	Cerenovus Gentech Medtronic Stryker	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None None	
6	Payment for expert testimony	⊠ None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None Rapid Medical	Imaging Core Laboratory
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None	

			entities with whom you have this hip or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
11	Stock or stock options	No No	ne	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	No	ne	
13	Other financial or non-financial interests	No No	ne	
Plea]⊠[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.			

Date:	10/12/2022	
Your Name:	David Weisenburger-Lile	
Manuscript Title:	Association of intravenous thrombolysis and pre-interventional reperfusion: a post-hoc analysis of the SWIFT DIRECT trial	
Manuscript Number (if known):	jnis-2022-019585.R1	

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3	Royalties or licenses	None None	

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4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None None	
6	Payment for expert testimony	⊠ None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	⊠ None	

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11	Stock or stock options	No No	ne	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	No	ne	
13	Other financial or non-financial interests	No No	ne	
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Date:	10/12/2022	
Your Name:	Gaultier Marnat	
Manuscript Title:	Association of intravenous thrombolysis and pre-interventional reperfusion: a post-hoc analysis of the SWIFT DIRECT trial	
Manuscript Number (if known):	jnis-2022-019585.R1	

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3	Royalties or licenses	None None	

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
4	Consulting fees	Stryker Neurovascular	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	Medtronic Microvention Europe	
6	Payment for expert testimony	⊠ None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None	

			entities with whom you have this hip or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
11	Stock or stock options	No No	ne	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	No	ne	
13	Other financial or non-financial interests	No No	ne	
Plea]⊠[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.			

Date:	10/12/2022
Your Name:	Jean Francois Albucher
Manuscript Title:	Association of intravenous thrombolysis and pre-interventional reperfusion: a post-hoc analysis of the SWIFT DIRECT trial
Manuscript Number (if known):	jnis-2022-019585.R1

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3	Royalties or licenses	None	

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5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None None	
6	Payment for expert testimony	⊠ None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	⊠ None	

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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	No	ne	
13	Other financial or non-financial interests	No No	ne	
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.				

Date:	10/12/2022
Your Name:	Jan Gralla
Manuscript Title:	Association of intravenous thrombolysis and pre-interventional reperfusion: a post-hoc analysis of the SWIFT DIRECT trial
Manuscript Number (if known):	jnis-2022-019585.R1

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		Time frame: past 36 months	s	
2	Grants or contracts from any entity (if not indicated in item #1 above).	None Swiss National Fund	MRI in stroke	
3	Royalties or licenses	None		

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None None	
6	Payment for expert testimony	⊠ None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	⊠ None	

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11	Stock or stock options	No No	ne	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	No	ne	
13	Other financial or non-financial interests	No No	ne	
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.				

Date:	10/12/2022	
Your Name:	Johannes Kaesmacher	
Manuscript Title:	Association of intravenous thrombolysis and pre-interventional reperfusion: a post-hoc analysis of the SWIFT DIRECT trial	
Manuscript Number (if known):	jnis-2022-019585.R1	

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		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)		
		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.	None Time frame: past 36 months	Click the tab key to add additional rows.		
2	Grants or contracts from any entity (if not indicated in item #1 above).	Medtronic Swiss National Science Foundation Swiss Academy of Medical Sciences	BEYOND SWIFT registry TECNO trial MRI research		
3	Royalties or licenses	Swiss Heart Foundation None	Cardiac MRI		

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None None	
6	Payment for expert testimony	⊠ None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	⊠ None	

			e all entities with whom you have this onship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
11	Stock or stock options		None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services		None	
13	Other financial or non-financial interests		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.			

Date:	10/12/2022
Your Name:	Lukas Bütikofer
Manuscript Title:	Association of intravenous thrombolysis and pre-interventional reperfusion: a post-hoc analysis of the SWIFT DIRECT trial
Manuscript Number (if known):	jnis-2022-019585.R1

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

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4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None None	
6	Payment for expert testimony	⊠ None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	⊠ None	

			entities with whom you have this hip or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
11	Stock or stock options	No No	ne	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	No	ne	
13	Other financial or non-financial interests	No No	ne	
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.				

Date:	10/12/2022
Your Name:	Marielle Ernst
Manuscript Title:	Association of intravenous thrombolysis and pre-interventional reperfusion: a post-hoc analysis of the SWIFT DIRECT trial
Manuscript Number (if known):	jnis-2022-019585.R1

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2	Grants or contracts from any entity (if not indicated in item #1 above).	⊠ None	
3	Royalties or licenses	None None	

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None None	
6	Payment for expert testimony	⊠ None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	⊠ None	

			entities with whom you have this hip or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
11	Stock or stock options	No No	ne	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	No	ne	
13	Other financial or non-financial interests	No No	ne	
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.				

Date:	10/12/2022
Your Name:	Maxime Gauberti
Manuscript Title:	Association of intravenous thrombolysis and pre-interventional reperfusion: a post-hoc analysis of the SWIFT DIRECT trial
Manuscript Number (if known):	jnis-2022-019585.R1

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		Time frame: past 36 month	s
2	Grants or contracts from any entity (if not indicated in item #1 above).	⊠ None	
3	Royalties or licenses	None None	

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None None	
6	Payment for expert testimony	⊠ None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	⊠ None	

			entities with whom you have this hip or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
11	Stock or stock options	No No	ne	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	No	ne	
13	Other financial or non-financial interests	No No	ne	
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.				

Date:	10/12/2022
Your Name:	Marc Ribo
Manuscript Title:	Association of intravenous thrombolysis and pre-interventional reperfusion: a post-hoc analysis of the SWIFT DIRECT trial
Manuscript Number (if known):	jnis-2022-019585.R1

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		Time frame: past 36 month	s
2	Grants or contracts from any entity (if not indicated in item #1 above).	⊠ None	
3	Royalties or licenses	None None	

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
4	Consulting fees	Medtronic Stryker Cerenovus Philips Apta Targets	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	Ischemia View	
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	⊠ None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None Sensome	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	⊠ None	

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
11	Stock or stock options	None Anaconda Biomed CVAid Methinks	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None None	
13	Other financial or non-financial interests	None	
Plea	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.		

Date:	10/12/2022
Your Name:	Omer Eker
Manuscript Title:	Association of intravenous thrombolysis and pre-interventional reperfusion: a post-hoc analysis of the SWIFT DIRECT trial
Manuscript Number (if known):	jnis-2022-019585.R1

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

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None None	
6	Payment for expert testimony	⊠ None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	⊠ None	

			entities with whom you have this hip or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
11	Stock or stock options	No No	ne	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	No	ne	
13	Other financial or non-financial interests	No No	ne	
Plea]⊠[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.			

Date:	10/12/2022	
Your Name:	Omid Nikoubashman	
Manuscript Title:	Association of intravenous thrombolysis and pre-interventional reperfusion: a post-hoc analysis of the SWIFT DIRECT trial	
Manuscript Number (if known):	jnis-2022-019585.R1	

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		Time frame: past 36 months	s
2	Grants or contracts from any entity (if not indicated in item #1 above).	Stryker Research Grant	
3	Royalties or licenses	None None	

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	□ None Phenox Stryker	
6	Payment for expert testimony	X None	
7	Support for attending meetings and/or travel	None None	
8	Patents planned, issued or pending	⊠ None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	⊠ None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	⊠ None	

			entities with whom you have this hip or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
11	Stock or stock options	No No	ne	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	No	ne	
13	Other financial or non-financial interests	No No	ne	
Plea]⊠[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.			

Date:	10/12/2022
Your Name:	Petra Ijäs
Manuscript Title:	Association of intravenous thrombolysis and pre-interventional reperfusion: a post-hoc analysis of the SWIFT DIRECT trial
Manuscript Number (if known):	jnis-2022-019585.R1

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3	Royalties or licenses	None None	

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4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None None	
6	Payment for expert testimony	⊠ None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	⊠ None	

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11	Stock or stock options	No No	ne	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	No	ne	
13	Other financial or non-financial interests	No No	ne	
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.				

Date:	10/12/2022
Your Name:	Tomas Dobrocky
Manuscript Title:	Association of intravenous thrombolysis and pre-interventional reperfusion: a post-hoc analysis of the SWIFT DIRECT trial
Manuscript Number (if known):	jnis-2022-019585.R1

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3	Royalties or licenses	None	

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4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None None	
6	Payment for expert testimony	⊠ None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	⊠ None	

			entities with whom you have this hip or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
11	Stock or stock options	No No	ne	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	No	ne	
13	Other financial or non-financial interests	No No	ne	
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.				

Date:	10/12/2022
Your Name:	Thomas R Meinel
Manuscript Title:	Association of intravenous thrombolysis and pre-interventional reperfusion: a post-hoc analysis of the SWIFT DIRECT trial
Manuscript Number (if known):	jnis-2022-019585.R1

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2	Grants or contracts from any entity (if not indicated in item #1 above).	⊠ None	
3	Royalties or licenses	None None	

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None None	
6	Payment for expert testimony	⊠ None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	⊠ None	

			entities with whom you have this hip or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
11	Stock or stock options	No No	ne	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	No	ne	
13	Other financial or non-financial interests	No No	ne	
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.				

Date:	10/12/2022
Your Name:	Urs Fischer
Manuscript Title:	Association of intravenous thrombolysis and pre-interventional reperfusion: a post-hoc analysis of the SWIFT DIRECT trial
Manuscript Number (if known):	jnis-2022-019585.R1

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	Time frame: past 36 months		
2	Grants or contracts from any entity (if not indicated in item #1 above).	Medtronic Swiss National Science Foundation Swiss Heart Foundation	BEYOND SWIFT registry
3	Royalties or licenses	None None	

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
4	Consulting fees	□ None Medtronic Stryker CSL Behring	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None None	
6	Payment for expert testimony	⊠ None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	⊠ None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	IN EXTREMIS trial TITAN trial Portola (Alexion)	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	□ None Journal of Neurointerventional Surgery Swiss Neurological Society	Editor Vice President

		relationship or indicate none (add rows as needed)	made to you or to your institution)
	Stock or stock options	None	
	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
	Other financial or non-financial interests	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.			

Date:	10/12/2022
Your Name:	Vi Tuan Hua
Manuscript Title:	Association of intravenous thrombolysis and pre-interventional reperfusion: a post-hoc analysis of the SWIFT DIRECT trial
Manuscript Number (if known):	jnis-2022-019585.R1

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