

ICMJE DISCLOSURE FORM

Date: 2/8/2022

Your Name: Johannes Kaesmacher

Manuscript Title: Evaluation of Sine Spin Flat Detector CT Imaging Compared to Multidetector CT

Manuscript Number (if known): 2021-018312.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.

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ICMJE DISCLOSURE FORM

Date: 2/8/2022

Your Name: Franca Wagner

Manuscript Title: Evaluation of Sine Spin Flat Detector CT Imaging Compared to Multidetector CT

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

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ICMJE DISCLOSURE FORM

Date: 2/8/2022

Your Name: Tomas Dobrocky

Manuscript Title: Evaluation of Sine Spin Flat Detector CT Imaging Compared to Multidetector CT

Manuscript Number (if known): neurintsurg-2021-018312

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Date:2/14/2022

Your Name:Dr. med. Eike Immo Piechowiak

Manuscript Title:Evaluation of Sine Spin Flat Detector CT Imaging Compared to Multidetector CT

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

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ICMJE DISCLOSURE FORM

Date: 2/15/2022

Your Name: Jan Gralla

Manuscript Title: "Evaluation of Sine Spin Flat Detector CT Imaging Compared to Multidetector CT

Manuscript Number (if known): neurintsurg-2021-018312.R1

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ICMJE DISCLOSURE FORM

Date:2/8/2022

Your Name:Pasquale Mordasini

Manuscript Title:Evaluation of Sine Spin Flat Detector CT Imaging Compared to Multidetector CT

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

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ICMJE DISCLOSURE FORM

Date: 2/7/2022

Your Name: VALENTINA DAFNI PETROULIA

Manuscript Title: "Evaluation of Sine Spin Flat Detector CT Imaging Compared to Multidetector CT"

Manuscript Number (if known): neurintsurg-2021-018312.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.

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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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ICMJE DISCLOSURE FORM

Date: 2/15/2022

Your Name: Sara M. Pilgram-Pastor

Manuscript Title: "Evaluation of Sine Spin Flat Detector CT Imaging Compared to Multidetector CT".

Manuscript Number (if known): neurintsurg-2021-018312.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.

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