

Disclosure Purpose: Weekly disclosures

## Disclosure Information:

1. **Are you the corresponding author?**

No.

2. **What is the Manuscript Title?**

Carotid artery plaque calcification. Impact-analysis of the different configurations

3. **What is the Manuscript Identifying Number (if you know it)?**

4. **Please select which of the following apply to each relationship or activity:**

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No, I have no relevant interests of this type

b. **Grants or contracts for research (If you need to add an interest, return to the previous step and select "Grant/Contract")**

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I certify that I have answered every question and have not altered the wording of any of the questions on this form.

**Disclosure Purpose:** Weekly disclosures

## Disclosure Information:

1. **Are you the corresponding author?**

No.

2. **What is the Manuscript Title?**

Carotid artery plaque calcification. Impact-analysis of the different configurations.

3. **What is the Manuscript Identifying Number (if you know it)?**

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