# Anteneh Feyissa

Disclosure Purpose: AJNR Disclosures

### Disclosure Information:

1. Are you the corresponding author?

No

2. What is the Manuscript Title?

Brain Abnormalities and Epilepsy in Patients with Parry-Romberg Syndrome

- 3. What is the Manuscript Identifying Number (if you know it)?
- 4. Please select which of the following apply to each relationship or activity:

You are not disclosing any interests to this organization.

5. I confirm I have disclosed all direct support for the present manuscript (e.g. funding, provision of study materials, medical writing, article processing charges, etc.) There is no time limit for this item.

Yes

- 6. Please indicate below whether in the past 36 months you have had any of the following interests that are topically related to the work reported in the manuscript.
  - a. Employment (If you need to add an interest, return to the previous step and select "Employment")

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") No, I have no relevant interests of this type
- c. Payment for consulting (If you need to add an interest, return to the previous step and select "Independent Contractor")

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d. Payments or honoraria for lectures, presentations, speakers bureaus, or educational events (If you need to add an interest, return to the previous step and select "Independent Contractor" and include the correct information under "Consultant")

No, I have no relevant interests of this type

- e. Payment for service on an advisory board (If you need to add an interest, return to the previous step and select "Independent Contractor," and choose "Other") No, I have no relevant interests of this type
- f. Payment for participation Data and safety monitoring board (If you need to add an interest, return to the previous step and select "Independent Contractor") No, I have no relevant interests of this type
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No

No.

10. Are there other financial or non-financial interests that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work not disclosed above.

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### Certification



# Vivek Gupta

Disclosure Purpose: AJNR Disclosures

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### Certification



# Sanjeet Grewal

Disclosure Purpose: AJNR Disclosures

### Disclosure Information:

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2. What is the Manuscript Title?

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No.

### Certification



# William Tatum

Disclosure Purpose: AJNR Disclosures

### Disclosure Information:

1. Are you the corresponding author?

Yes

2. What is the Manuscript Title?

Brain Abnormalities and Epilepsy in Patients iwth Parry Romberg Syndrome

- What is the Manuscript Identifying Number (if you know it)?
  Don't know this.
- 4. Please select which of the following apply to each relationship or activity:

You are not disclosing any interests to this organization.

5. I confirm I have disclosed all direct support for the present manuscript (e.g. funding, provision of study materials, medical writing, article processing charges, etc.) There is no time limit for this item.

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No

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No.
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10. Are there other financial or non-financial interests that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work not disclosed above.

No.

## Certification



# Sukhwinder Sandhu

Disclosure Purpose: AJNR Disclosures

1. Are you the corresponding author?

No

2. What is the Manuscript Title?

Brain Abnormalities and Epilepsy in Patients with Parry-Romberg Syndrome

- What is the Manuscript Identifying Number (if you know it)? AJNR-22-00037-85615176
- 4. Please select which of the following apply to each relationship or activity:

You are not disclosing any interests to this organization.

5. I confirm I have disclosed all direct support for the present manuscript (e.g. funding, provision of study materials, medical writing, article processing charges, etc.) There is no time limit for this item.

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No

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No.
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No.

## Certification



# Lela Okromelidze

Disclosure Purpose: AJNR Disclosures

#### Disclosure Information:

- 1. Are you the corresponding author? No.
- 2. What is the Manuscript Title?

Brain Abnormalities and Epilepsy in Patients with Parry-Romberg Syndrome,

- What is the Manuscript Identifying Number (if you know it)? ajnr-22-00037
- 4. Please select which of the following apply to each relationship or activity:

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## Certification



# Erik Middlebrooks

Jan 24, 2022 15:22:03 EST American Society of Neuroradiology

Disclosure Purpose: AJNR Disclosures

### Disclosure Information:

1. Are you the corresponding author?

Yes

2. What is the Manuscript Title?

Brain Abnormalities and Epilepsy in Patients with Parry-Romberg Syndrome

- 3. What is the Manuscript Identifying Number (if you know it)? AJNR-22-00037
- 4. Please select which of the following apply to each relationship or activity:
  - a. Independent Contractor Consultant BOSTON SCIENTIFIC CORPORATION Neither
  - b. Grant / Contract Varian Medical Systems, Inc.

Neither

5. I confirm I have disclosed all direct support for the present manuscript (e.g. funding, provision of study materials, medical writing, article processing charges, etc.) There is no time limit for this item.

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## Certification



# anthony ritaccio

Disclosure Purpose: AJNR Disclosures

### Disclosure Information:

- 1. Are you the corresponding author? No.
- 2. What is the Manuscript Title?

Brain Abnormalities and Epilepsy in Patients with Parry-Romberg Syndrome

- What is the Manuscript Identifying Number (if you know it)? not known
- 4. Please select which of the following apply to each relationship or activity:

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## Certification



# **Ryan McGeary**

Disclosure Purpose: AJNR Disclosures

### Disclosure Information:

1. Are you the corresponding author?

No

2. What is the Manuscript Title?

Brain Abnormalities and Epilepsy in Patients with Parry-Romberg Syndrome

- 3. What is the Manuscript Identifying Number (if you know it)?
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No

No.

10. Are there other financial or non-financial interests that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work not disclosed above.

No.

### Certification



# S. Ali Montazeri

Disclosure Purpose: AJNR Disclosures

#### Disclosure Information:

1. Are you the corresponding author? No.

NU

2. What is the Manuscript Title?

Brain Abnormalities and Epilepsy in Patients with Parry-Romberg Syndrome

- 3. What is the Manuscript Identifying Number (if you know it)? AJNR-22-00037
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e. Payment for service on an advisory board (If you need to add an interest, return to the previous step and select "Independent Contractor," and choose "Other")

No, I have no relevant interests of this type

- f. Payment for participation Data and safety monitoring board (If you need to add an interest, return to the previous step and select "Independent Contractor") No, I have no relevant interests of this type
- g. Expert witness testimony (If you need to add an interest, return to the previous step and select "Independent Contractor")
  No, I have no relevant interests of this type
- h. Royalties from Patents, Trademarks, Copyrights or other intellectual property (If you need to add an interest, return to the previous step and select the appropriate interest type) No, I have no relevant interests of this type

i. Patents planned, issued, or pending, whether or not you receive royalties (If you need to add an interest, return to the previous step and select "Patents") No, I have no relevant interests of this type

- j. Fiduciary Officer or Other Board Membership (If you need to add an interest, return to the previous step and select "Fiduciary Officer") No, I have no relevant interests of this type
- k. Stock or stock options (If you need to add an interest, return to the previous step and select the appropriate interest type) No, I have no relevant interests of this type
- I. Support for attending meetings or other travel (If you need to add an interest, return to the previous step and select "Travel") No, I have no relevant interests of this type

You are not disclosing any interests to this organization.

 $7. \quad \mbox{Was any individual paid to provide professional writing assistance with this manuscript?}$ 

No

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No.
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10. Are there other financial or non-financial interests that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work not disclosed above.

No.

## Certification



# Ayushi Jain

Disclosure Purpose: AJNR Disclosures

### Disclosure Information:

1. Are you the corresponding author?

No

2. What is the Manuscript Title?

Brain Abnormalities and Epilepsy in Patients with Parry-Romberg Syndrome

- 3. What is the Manuscript Identifying Number (if you know it)?
- 4. Please select which of the following apply to each relationship or activity:

You are not disclosing any interests to this organization.

5. I confirm I have disclosed all direct support for the present manuscript (e.g. funding, provision of study materials, medical writing, article processing charges, etc.) There is no time limit for this item.

Yes

- 6. Please indicate below whether in the past 36 months you have had any of the following interests that are topically related to the work reported in the manuscript.
  - a. Employment (If you need to add an interest, return to the previous step and select "Employment")

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") No, I have no relevant interests of this type
- c. Payment for consulting (If you need to add an interest, return to the previous step and select "Independent Contractor")

No, I have no relevant interests of this type

d. Payments or honoraria for lectures, presentations, speakers bureaus, or educational events (If you need to add an interest, return to the previous step and select "Independent Contractor" and include the correct information under "Consultant")

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No

No.

10. Are there other financial or non-financial interests that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work not disclosed above.

No.

### Certification



## Joseph Sirven

Disclosure Purpose: AJNR Disclosures

### Disclosure Information:

1. Are you the corresponding author?

No

2. What is the Manuscript Title?

Epilepsy and radio graphic findings in Parry Romberg Syndrome

- 3. What is the Manuscript Identifying Number (if you know it)?
- 4. Please select which of the following apply to each relationship or activity:

You are not disclosing any interests to this organization.

5. I confirm I have disclosed all direct support for the present manuscript (e.g. funding, provision of study materials, medical writing, article processing charges, etc.) There is no time limit for this item.

Yes

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No

No.

10. Are there other financial or non-financial interests that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work not disclosed above.

No.

### Certification



# Cynthia De la Garza Ramos

Jan 24, 2022 12:52:50 EST American Society of Neuroradiology

Disclosure Purpose: AJNR Disclosures

#### **Disclosure Information:**

1. Are you the corresponding author?

No

2. What is the Manuscript Title?

Brain Abnormalities and Epilepsy in Patients with Parry-Romberg Syndrome

- 3. What is the Manuscript Identifying Number (if you know it)? AJNR-22-00037
- 4. Please select which of the following apply to each relationship or activity:

You are not disclosing any interests to this organization.

5. I confirm I have disclosed all direct support for the present manuscript (e.g. funding, provision of study materials, medical writing, article processing charges, etc.) There is no time limit for this item.

Yes

- 6. Please indicate below whether in the past 36 months you have had any of the following interests that are topically related to the work reported in the manuscript.
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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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You are not disclosing any interests to this organization.

 $7. \quad \mbox{Was any individual paid to provide professional writing assistance with this manuscript?}$ 

No

8.

Have you or your institution received equipment, materials, drugs, or services in direct support of the work in the manuscript (without time limit) not disclosed above?

No.

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No.
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10. Are there other financial or non-financial interests that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work not disclosed above.

No.

## Certification



# **Alok Bhatt**

Disclosure Purpose: AJNR Disclosures

### Disclosure Information:

1. Are you the corresponding author?

No

2. What is the Manuscript Title?

Brain Abnormalities and Epilepsy in Patients with Parry-Romberg Syndrome

- 3. What is the Manuscript Identifying Number (if you know it)?
- 4. Please select which of the following apply to each relationship or activity:

You are not disclosing any interests to this organization.

5. I confirm I have disclosed all direct support for the present manuscript (e.g. funding, provision of study materials, medical writing, article processing charges, etc.) There is no time limit for this item.

Yes

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No

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