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Patel
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Manish

2. Surname (Last Name)  
   Patel

3. Date  
   20-March-2020

4. Are you the corresponding author?  
   ✔ Yes  
   No

5. Manuscript Title  
   Robotic Assisted Magnetic Resonance Imaging Ultrasound Fusion Results In Higher Significant Cancer Detection Compared To Visual Prostate Targeting In Biopsy Naive Men.

6. Manuscript Identifying Number (if you know it)  
   TAU-19-435

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?  
   ✔ No

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Are there any relevant conflicts of interest?  
   ✔ No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
   ✔ No
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Dr. Patel 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)  
   SAMIR

2. Surname (Last Name)  
   MUTER

3. Date  
   20-March-2020

4. Are you the corresponding author?  
   ☐ Yes  ☑ No

Corresponding Author’s Name  
   PROF. MANISH PATEL

5. Manuscript Title  
   Robotic Assisted Magnetic Resonance Imaging Ultrasound Fusion Results In Higher Significant Cancer Detection Compared To Visual Prostate Targeting In Biopsy Naive Men.

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?  
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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. MUTER has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  PHILIP
2. Surname (Last Name)  VLADICA
3. Date  10-April-2020
4. Are you the corresponding author?  Yes  No
   Corresponding Author’s Name  MANISH PATEL
5. Manuscript Title
   Title: Robotic Assisted Magnetic Resonance Imaging Ultrasound Fusion Results In Higher Significant Cancer Detection Compared To Visual Prostate Targeting In Biopsy Naive Men.
6. Manuscript Identifying Number (if you know it)
   TAU-19-435

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Are there any relevant conflicts of interest?  Yes  No

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ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

| 1. Given Name (First Name) | 2. Surname (Last Name) | 3. Date |
|---------------------------|------------------------|---------|
| David                     | Gillatt                | 20-March-2020 |

4. Are you the corresponding author?  

- [x] No

Corresponding Author’s Name  

Manish I Patel

5. Manuscript Title  

Assisted Magnetic Resonance Imaging Ultrasound Fusion Results In Higher Significant Cancer Detection Compared To Visual Prostate Targeting In Biopsy Naive Men.

6. Manuscript Identifying Number (if you know it)  

TAU-19-435

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Are there any relevant conflicts of interest?  

- [x] No

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- [x] No

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