

ICMJE DISCLOSURE FORM

Date: 10/1/2024

Your Name: Ted K.S. Ng, PhD

Manuscript Title: Guidelines for the Standardization of Pre-analytic Variables for Salivary Biomarker Studies in Alzheimer's Disease Research: An Updated Review and Consensus of the Salivary Biomarkers for Dementia Research Working Group

Manuscript Number (if known): ADJ-D-24-01353R1

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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.

ICMJE DISCLOSURE FORM

Date: 2nd October, 2024

Your Name: Dr Chinedu Udeh-Momoh

Manuscript Title: Guidelines for the Standardization of Pre-analytic Variables for Salivary Biomarker Studies in Alzheimer's Disease Research: An Updated Review and Consensus of the Salivary Biomarkers for Dementia Research Working Group

Manuscript Number (if known): ADJ-D-24-01353R1

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		2022 - G2-SCH-2022-11-12245 UK Defence & Security Accelerator, Veterans' Health Innovation Fund	Payment made to institution
		2022 - RoseTrees Foundation Seedcorn award	Payment made to institution
3	Royalties or licenses	<input checked="" type="checkbox"/> None	
4	Consulting fees	<input type="checkbox"/> None	
		Aga Khan University	Payment made to CU
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input checked="" type="checkbox"/> None	
6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input type="checkbox"/> None	
		Dementia and Brain Aging in LMIC 2022 conference – Alzheimer's Association Competitive Travel Fellowship for symposium presentation at the LMIC meeting in Nairobi, Kenya.	Payment made to CU
		Alzheimer's Association International conference (AAIC) 2022 – Alzheimer's Association Competitive Travel Fellowship for symposium presentation at the AAIC meeting in San Diego, USA.	Payment made to CU

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10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input type="checkbox"/> None	
		Board of Trustee member at British Society for Neuroendocrinology	Unpaid
		Executive Committee member, Alzheimer's Association ISTAART BBB-PIA	Unpaid
		Expert Committee member, NIH-Sponsored National Academies of Science, Engineering and Medicine (NASEM) project to determine research priorities for ADRD	Unpaid
		Expert Committee member, Guideline Development Group (GDG) for the Update of WHO's Guideline on Risk Reduction for Cognitive Decline and Dementia	Unpaid
11	Stock or stock options	<input checked="" type="checkbox"/> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
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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.

ICMJE DISCLOSURE FORM

Date: 10/5/2024

Your Name: Lim Mei Ann

Manuscript Title: Guidelines for the Standardization of Pre-analytic Variables for Salivary Biomarker Studies in Alzheimer's Disease Research: An Updated Review and Consensus of the Salivary Biomarkers for Dementia Research Working Group

Manuscript Number (if known): ADJ-D-24-01353R1

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Date: 10/1/2024

Your Name: Helena Sophia Gleerup

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Date: 10/1/2024

Your Name: Wayne Richard Leifert

Manuscript Title: Guidelines for the Standardization of Pre-analytic Variables for Salivary Biomarker Studies in Alzheimer's Disease Research: An Updated Review and Consensus of the Salivary Biomarkers for Dementia Research Working Group

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3	Royalties or licenses	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 20px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> </table>									
4	Consulting fees	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 20px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> </table>									
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 20px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> </table>									
6	Payment for expert testimony	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 20px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> </table>									
7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 20px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> </table>									
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 20px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> </table>									
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 20px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> </table>									
10	Leadership or fiduciary role in other board,	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 20px;"></td><td style="width: 50%;"></td></tr> </table>									

		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)
	society, committee or advocacy group, paid or unpaid		
11	Stock or stock options	<input checked="" type="checkbox"/> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> 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.

ICMJE DISCLOSURE FORM

Date: 10/1/2024

Your Name: Catherine Ajalo

Manuscript Title: Guidelines for the Standardization of Pre-analytic Variables for Salivary Biomarker Studies in Alzheimer's Disease Research: An Updated Review and Consensus of the Salivary Biomarkers for Dementia Research Working Group

Manuscript Number (if known): ADJ-D-24-01353R1

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The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

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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Time frame: past 36 months								
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11	Stock or stock options	<input checked="" type="checkbox"/> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> 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.

ICMJE DISCLOSURE FORM

Date: 10/02/2024

Your Name: Nicholas J. Ashton

Manuscript Title: Guidelines for the Standardization of Pre-analytic Variables for Salivary Biomarker Studies in Alzheimer's Disease Research: An Updated Review and Consensus of the Salivary Biomarkers for Dementia Research Working Group

Manuscript Number (if known): ADJ-D-24-01353R1

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Time frame: past 36 months								
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4	Consulting fees	<input type="checkbox"/> None <table border="1"> <tr> <td>Quanterix</td> <td>Payments to NJA</td> </tr> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td></td> </tr> </table>	Quanterix	Payments to NJA					
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5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input type="checkbox"/> None <table border="1"> <tr> <td>Alamar Biosciences, Biogen, Eli-Lilly, Quanterix,</td> <td>Payments to NJA</td> </tr> <tr> <td></td> <td></td> </tr> </table>	Alamar Biosciences, Biogen, Eli-Lilly, Quanterix,	Payments to NJA					
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8	Patents planned, issued or pending	<input type="checkbox"/> None <table border="1"> <tr> <td>Application No.: PCT/US2024/037834 (WSGR Docket No. 58484-709.601).</td> <td>Methods for Remote Blood Collection, Extraction and Analysis of Neuro Biomarkers</td> </tr> <tr> <td></td> <td></td> </tr> </table>	Application No.: PCT/US2024/037834 (WSGR Docket No. 58484-709.601).	Methods for Remote Blood Collection, Extraction and Analysis of Neuro Biomarkers					
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9	Participation on a Data Safety Monitoring Board or Advisory Board	<input type="checkbox"/> None <table border="1"> <tr> <td>Advisory Board for Biogen, TargetALS, and TauRx</td> <td>Payments to NJA</td> </tr> <tr> <td></td> <td></td> </tr> </table>	Advisory Board for Biogen, TargetALS, and TauRx	Payments to NJA					
Advisory Board for Biogen, TargetALS, and TauRx	Payments to NJA								
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input checked="" type="checkbox"/> None <table border="1"> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td></td> </tr> </table>							

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11	Stock or stock options	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 20px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> </table>							
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 20px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> </table>							
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 20px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> </table>							

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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.

ICMJE DISCLOSURE FORM

Date: 10/2/2024

Your Name: Henrik Zetterberg

Manuscript Title: Guidelines for the Standardization of Pre-analytic Variables for Salivary Biomarker Studies in Alzheimer's Disease Research: An Updated Review and Consensus of the Salivary Biomarkers for Dementia Research Working Group

Manuscript Number (if known): ADJ-D-24-01353R1

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The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

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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.	<input type="checkbox"/> None HZ is a Wallenberg Scholar and a Distinguished Professor at the Swedish Research Council supported by grants from the Swedish Research Council (#2023-00356; #2022-01018 and #2019-02397), the European Union's Horizon Europe research and innovation programme under grant agreement No 101053962, Swedish State Support for Clinical Research (#ALFGBG-71320), the Alzheimer Drug Discovery Foundation (ADDF), USA (#201809-2016862), the AD Strategic Fund and the Alzheimer's Association (#ADSF-21-831376-C, #ADSF-21-831381-C, #ADSF-21-831377-C, and #ADSF-24-1284328-C), the Bluefield Project, Cure Alzheimer's Fund, the Olav Thon Foundation, the Erling-Persson Family Foundation, Stiftelsen för Gamla Tjänarinnor, Hjärtfonden, Sweden (#FO2022-0270), the European Union's Horizon 2020 research and innovation programme under the Marie Skłodowska-Curie grant agreement No 860197 (MIRIADE), the European Union Joint	Payments made to Institution.

		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)
		Programme – Neurodegenerative Disease Research (JPND2021-00694), the National Institute for Health and Care Research University College London Hospitals Biomedical Research Centre, and the UK Dementia Research Institute at UCL (UKDRI-1003).	
			Click the tab key to add additional rows.

Time frame: past 36 months

2	Grants or contracts from any entity (if not indicated in item #1 above).	<input type="checkbox"/> None HZ is a Wallenberg Scholar and a Distinguished Professor at the Swedish Research Council supported by grants from the Swedish Research Council (#2023-00356; #2022-01018 and #2019-02397), the European Union’s Horizon Europe research and innovation programme under grant agreement No 101053962, Swedish State Support for Clinical Research (#ALFGBG-71320), the Alzheimer Drug Discovery Foundation (ADDF), USA (#201809-2016862), the AD Strategic Fund and the Alzheimer's Association (#ADSF-21-831376-C, #ADSF-21-831381-C, #ADSF-21-831377-C, and #ADSF-24-1284328-C), the Bluefield Project, Cure Alzheimer’s Fund, the Olav Thon Foundation, the Erling-Persson Family Foundation, Stiftelsen för Gamla Tjänarinnor, Hjärtfonden, Sweden (#FO2022-0270), the European Union’s Horizon 2020 research and innovation programme under the Marie Skłodowska-Curie grant agreement No 860197 (MIRIADE), the European Union Joint Programme – Neurodegenerative Disease Research (JPND2021-00694), the National Institute for Health and Care Research University College London Hospitals Biomedical Research Centre, and the UK Dementia Research Institute at UCL (UKDRI-1003).	Payments made to Institution.

3	Royalties or licenses	<input checked="" type="checkbox"/> 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	<input type="checkbox"/> None	
		HZ has served at scientific advisory boards and/or as a consultant for Abbvie, Acumen, Alector, Alzinova, ALZPath, Amylyx, Annexon, Apellis, Artery Therapeutics, AZTherapies, Cognito Therapeutics, CogRx, Denali, Eisai, LabCorp, Merry Life, Nervgen, Novo Nordisk, Optoceutics, Passage Bio, Pinteon Therapeutics, Prothena, Red Abbey Labs, reMYND, Roche, Samumed, Siemens Healthineers, Triplet Therapeutics, and Wave.	Payments made to HZ.
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input type="checkbox"/> None	
		HZ has given lectures in symposia sponsored by Alzecure, BioArctic, Biogen, Cellectricon, Fujirebio, Lilly, Novo Nordisk, Roche, and WebMD.	Payments made to HZ.
6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> None	
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input type="checkbox"/> None	
		HZ has served at scientific advisory boards and/or as a consultant for Abbvie, Acumen, Alector, Alzinova, ALZPath, Amylyx, Annexon, Apellis, Artery Therapeutics, AZTherapies, Cognito Therapeutics, CogRx, Denali, Eisai, LabCorp, Merry Life, Nervgen, Novo Nordisk, Optoceutics, Passage Bio, Pinteon Therapeutics, Prothena, Red Abbey	Payments made to HZ.

		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)
		Labs, reMYND, Roche, Samumed, Siemens Healthineers, Triplet Therapeutics, and Wave.	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input type="checkbox"/> None HZ is chair of the Alzheimer’s Association Global Biomarker Standardization Consortium and chair of the IFCC WG-BND.	No payments made.
11	Stock or stock options	<input type="checkbox"/> None HZ is a co-founder of Brain Biomarker Solutions in Gothenburg AB (BBS), which is a part of the GU Ventures Incubator Program.	Payments made to HZ.
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

Please place an “X” next to the following statement to indicate your agreement:

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ICMJE DISCLOSURE FORM

Date: 10/1/2024

Your Name: Robert A. Rissman

Manuscript Title: Guidelines for the Standardization of Pre-analytic Variables for Salivary Biomarker Studies in Alzheimer's Disease Research: An Updated Review and Consensus of the Salivary Biomarkers for Dementia Research Working Group

Manuscript Number (if known): ADJ-D-24-01353R1

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	Board or Advisory Board		
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input checked="" type="checkbox"/> None	
11	Stock or stock options	<input checked="" type="checkbox"/> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> 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.

ICMJE DISCLOSURE FORM

Date: 10/1/2024

Your Name: Charisse Winston

Manuscript Title: Guidelines for the Standardization of Pre-analytic Variables for Salivary Biomarker Studies in Alzheimer's Disease Research: An Updated Review and Consensus of the Salivary Biomarkers for Dementia Research Working Group

Manuscript Number (if known): ADJ-D-24-01353R1

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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The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

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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.

ICMJE DISCLOSURE FORM

Date: 10/1/2024

Your Name: Sid O'Bryant

Manuscript Title: Guidelines for the Standardization of Pre-analytic Variables for Salivary Biomarker Studies in Alzheimer's Disease Research: An Updated Review and Consensus of the Salivary Biomarkers for Dementia Research Working Group

Manuscript Number (if known): ADJ-D-24-01353R1

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ICMJE DISCLOSURE FORM

Date: 4/10/2024

Your Name: Robert Jenkins

Manuscript Title: Guidelines for the Standardization of Pre-analytic Variables for Salivary Biomarker Studies in Alzheimer's Disease Research: An Updated Review and Consensus of the Salivary Biomarkers for Dementia Research Working Group

Manuscript Number (if known): ADJ-D-24-01353R1

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ICMJE DISCLOSURE FORM

Date: 10/1/2024

Your Name: Eva Carro

Manuscript Title: Guidelines for the Standardization of Pre-analytic Variables for Salivary Biomarker Studies in Alzheimer's Disease Research: An Updated Review and Consensus of the Salivary Biomarkers for Dementia Research Working Group

Manuscript Number (if known): ADJ-D-24-01353R1

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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.

ICMJE DISCLOSURE FORM

Date: 2/10/2024

Your Name: Gorka Orive

Manuscript Title: Guidelines for the Standardization of Pre-analytic Variables for Salivary Biomarker Studies in Alzheimer's Disease Research: An Updated Review and Consensus of the Salivary Biomarkers for Dementia Research Working Group

Manuscript Number (if known): ADJ-D-24-01353R1

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The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

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ICMJE DISCLOSURE FORM

Date: 10/1/2024

Your Name: Stefano Tamburin

Manuscript Title: Guidelines for the Standardization of Pre-analytic Variables for Salivary Biomarker Studies in Alzheimer's Disease Research: An Updated Review and Consensus of the Salivary Biomarkers for Dementia Research Working Group

Manuscript Number (if known): ADJ-D-24-01353R1

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ICMJE DISCLOSURE FORM

Date: 10/1/2024

Your Name: Marcos Olvera-Rojas

Manuscript Title: Guidelines for the Standardization of Pre-analytic Variables for Salivary Biomarker Studies in Alzheimer's Disease Research: An Updated Review and Consensus of the Salivary Biomarkers for Dementia Research Working Group

Manuscript Number (if known): ADJ-D-24-01353R1

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ICMJE DISCLOSURE FORM

Date: 10/2/2024

Your Name: Patricio Solis-urra

Manuscript Title: Guidelines for the Standardization of Pre-analytic Variables for Salivary Biomarker Studies in Alzheimer's Disease Research: An Updated Review and Consensus of the Salivary Biomarkers for Dementia Research Working Group

Manuscript Number (if known): ADJ-D-24-01353R1

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9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 20px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> </table>									
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13	Other financial or non-financial interests	<input checked="" type="checkbox"/> 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.

ICMJE DISCLOSURE FORM

Date: 10/1/2024

Your Name: Irene Esteban Cornejo

Manuscript Title: Guidelines for the Standardization of Pre-analytic Variables for Salivary Biomarker Studies in Alzheimer's Disease Research: An Updated Review and Consensus of the Salivary Biomarkers for Dementia Research Working Group

Manuscript Number (if known): ADJ-D-24-01353R1

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The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

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ICMJE DISCLOSURE FORM

Date: 2/10/2024

Your Name: Gustavo Alves Andrade dos Santos

Manuscript Title: Guidelines for the Standardization of Pre-analytic Variables for Salivary Biomarker Studies in Alzheimer's Disease Research: An Updated Review and Consensus of the Salivary Biomarkers for Dementia Research Working Group

Manuscript Number (if known): ADJ-D-24-01353R1

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ICMJE DISCLOSURE FORM

Date: 10/1/2024

Your Name: Kumar B. Rajan, Ph.D.

Manuscript Title: Guidelines for the Standardization of Pre-analytic Variables for Salivary Biomarker Studies in Alzheimer's Disease Research: An Updated Review and Consensus of the Salivary Biomarkers for Dementia Research Working Group

Manuscript Number (if known): ADJ-D-24-01353R1

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ICMJE DISCLOSURE FORM

Date: 10/1/2024

Your Name: David Koh

Manuscript Title: Guidelines for the Standardization of Pre-analytic Variables for Salivary Biomarker Studies in Alzheimer's Disease Research: An Updated Review and Consensus of the Salivary Biomarkers for Dementia Research Working Group

Manuscript Number (if known): ADJ-D-24-01353R1

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	society, committee or advocacy group, paid or unpaid		
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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> 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.

ICMJE DISCLOSURE FORM

Date: 10/1/2024

Your Name: Anja Hviid Simonsen

Manuscript Title: Guidelines for the Standardization of Pre-analytic Variables for Salivary Biomarker Studies in Alzheimer's Disease Research: An Updated Review and Consensus of the Salivary Biomarkers for Dementia Research Working Group

Manuscript Number (if known): ADJ-D-24-01353R1

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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.

ICMJE DISCLOSURE FORM

Date: 10/1/2024

Your Name: Paul Desmond Slowey

Manuscript Title: Guidelines for the Standardization of Pre-analytic Variables for Salivary Biomarker Studies in Alzheimer's Disease Research: An Updated Review and Consensus of the Salivary Biomarkers for Dementia Research Working Group

Manuscript Number (if known): ADJ-D-24-01353R1

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	society, committee or advocacy group, paid or unpaid	Co-Chair, Saliva Working Group for Alzheimer's Disease, an I-STAART PIA under the umbrella of the Alzheimer's Association	Unpaid
		Founder, North American Saliva Symposium	Unpaid
		Founder, CEO, Oasis Diagnostics Corporation	Salary from Oasis Diagnostics
		Consultant, RapidDx, Inc	No salary, stock options only
11	Stock or stock options	<input type="checkbox"/> None	
		RapidDx, Inc.	Stock options to Paul Desmond Slowey
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input type="checkbox"/> None	
		Founder and CEO of Oasis Diagnostics Corporation	Paid Salary
		Chief Science Consultant RapidDx, Inc.	Stock Options Only
		Honorary Professor, Central South Univ, China	No payment

Please place an "X" next to the following statement to indicate your agreement:

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ICMJE DISCLOSURE FORM

Date: 10/08/2024

Your Name: Alzheimer's Association International Society to Advance Alzheimer's Research and Treatment: Biofluid Based Biomarkers Professional Interest Area Salivary Biomarkers for Dementia Research Working Group

Manuscript Title: Guidelines for the Standardization of Pre-analytic Variables for Salivary Biomarker Studies in Alzheimer's Disease Research: An Updated Review and Consensus of the Salivary Biomarkers for Dementia Research Working Group

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