

ICMJE DISCLOSURE FORM

Date: 8/13/2023

Your Name: Anat Blumenfeld

Manuscript Title: Regeneration of injured articular cartilage using the recombinant human amelogenin protein (rHAM+)

Manuscript Number (if known): BJR-2023-0019.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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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: 8/13/2023

Your Name: Dan Deutsch

Manuscript Title: Regeneration of injured articular cartilage using the recombinant human amelogenin protein (rHAM+)

Manuscript Number (if known): BJR-2023-0019.R1

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ICMJE DISCLOSURE FORM

Date: 8/26/2021

Your Name: Yechiel N. Gellman

Manuscript Title: Regeneration of injured articular cartilage using the recombinant human amelogenin protein (rHAM+)

Manuscript Number (if known): BJR-2023-0019.R1

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Date: 8/14/2023

Your Name: Koby Goren

Manuscript Title: Regeneration of injured articular cartilage using the recombinant human amelogenin protein (rHAM+)

Manuscript Number (if known): BJR-2023-0019.R1

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Date: 8/13/2023

Your Name: Salem Hanhan

Manuscript Title: Regeneration of injured articular cartilage using the recombinant human amelogenin protein (rHAM+)

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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: 8/10/2023

Your Name: Amir Haze

Manuscript Title: Regeneration of injured articular cartilage using the recombinant human amelogenin protein (rHAM+)

Manuscript Number (if known): BJR-2023-0019.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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7	Support for attending meetings and/or travel	<input type="checkbox"/> None	
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8	Patents planned, issued or pending	<input type="checkbox"/> None	
		US Patent Application No. 14/116,796	Inventors: AH, AB, DD
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> None	
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ICMJE DISCLOSURE FORM

Date: 10/13/2023

Your Name: Omer Helwa-Shalom

Manuscript Title: Regeneration of injured articular cartilage using the recombinant human amelogenin protein (rHAM+)

Manuscript Number (if known): BJR-2023-0019.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: 8/10/2023

Your Name: Nissim Khaimov

Manuscript Title: Regeneration of injured articular cartilage using the recombinant human amelogenin protein (rHAM+)

Manuscript Number (if known): BJR-2023-0019.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: 8/13/2023

Your Name: Shany Ivon Markowitz

Manuscript Title: Regeneration of injured articular cartilage using the recombinant human amelogenin protein (rHAM+)

Manuscript Number (if known): BJR-2023-0019.R1

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7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> None	
8	Patents planned, issued or pending	<input type="checkbox"/> None	
		US Patent Application No. 14/116,796	Inventors: AH, AB, DD
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> None	
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ICMJE DISCLOSURE FORM

Date: 8/10/2023

Your Name: Hani Nevo

Manuscript Title: Regeneration of injured articular cartilage using the recombinant human amelogenin protein (rHAM+)

Manuscript Number (if known): BJR-2023-0019.R1

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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
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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: 8/13/2023

Your Name: Faris Saba

Manuscript Title: Regeneration of injured articular cartilage using the recombinant human amelogenin protein (rHAM+)

Manuscript Number (if known): BJR-2023-0019.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: 8/14/2023

Your Name: Dekel Shilo

Manuscript Title: Regeneration of injured articular cartilage using the recombinant human amelogenin protein (rHAM+)

Manuscript Number (if known): BJR-2023-0019.R1

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Date: 8/13/2023

Your Name: Elad Spitzer

Manuscript Title: Regeneration of injured articular cartilage using the recombinant human amelogenin protein (rHAM+)

Manuscript Number (if known): BJR-2023-0019.R1

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