

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Ashwin

2. Surname (Last Name)

RajKumar

3. Date

05-May-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Prof. Vikram Kapila

5. Manuscript Title

Usability Study of Wearable Inertial Sensors for Exergames (WISE) for Movement Assessment and Exercise

6. Manuscript Identifying Number (if you know it)

mHealth-19-199

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Dr. RajKumar has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Fabio

2. Surname (Last Name)

Vulpi

3. Date

05-May-2020

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Prof. Vikram Kapila

5. Manuscript Title

Usability Study of Wearable Inertial Sensors for Exergames (WISE) for Movement Assessment and Exercise

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mHealth-19-199

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No

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Dr. Vulpi has nothing to disclose.

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1. Given Name (First Name)

Satish Reddy

2. Surname (Last Name)

Bethi

3. Date

05-May-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Prof. Vikram Kapila

5. Manuscript Title

Usability Study of Wearable Inertial Sensors for Exergames (WISE) for Movement Assessment and Exercise

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Section 1. Identifying Information

1. Given Name (First Name) Preeti 2. Surname (Last Name) Raghavan 3. Date 05-May-2020

4. Are you the corresponding author? Yes No Corresponding Author's Name
Vikram Kapila

5. Manuscript Title
Usability Study of Wearable Inertial Sensors for Exergames (WISE) for Movement Assessment and Exercise

6. Manuscript Identifying Number (if you know it)
mHealth-19-199

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Mirrored Motion Works, Inc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consulting

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

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Patent?	Pending?	Issued?	Licensed?	Royalties?	Licensee?	Comments
P. Raghavan and V. Kapila, "Game-based Sensorimotor Rehabilitator," U.S. Patent and Trademark Office, U.S. Patent US 20160067136 A1, issued May 28, 2019.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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Dr. Raghavan reports other from Mirrored Motion Works, Inc., outside the submitted work; In addition, Dr. Raghavan has a patent P. Raghavan and V. Kapila, "Game-based Sensorimotor Rehabilitator," U.S. Patent and Trademark Office, U.S. Patent US 20160067136 A1, issued May 28, 2019. issued.

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1. Given Name (First Name) Vikram 2. Surname (Last Name) Kapila 3. Date 05-May-2020

4. Are you the corresponding author? Yes No

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