ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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1. Identifying information.

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

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Other: Anything not covered under the previous three boxes

Pending: The patent has been filed but not issued

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Licensed: The patent has been licensed to an entity, whether earning royalties or not

Royalties: Funds are coming in to you or your institution due to your patent
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Christopher

2. Surname (Last Name)  
   Bono

3. Date  
   16-January-2014

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

Corresponding Author’s Name  
   Kirkham Wood

5. Manuscript Title  
   Operative versus non-operative treatment of neurologically intact thoracolumbar burst fractures: 16-22 year follow up

6. Manuscript Identifying Number (if you know it)

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?  
   Yes ☐  No ☑

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Are there any relevant conflicts of interest?  
   Yes ☑  No ☐

If yes, please fill out the appropriate information below.

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<th>Name of Entity</th>
<th>Grant?</th>
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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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Section 6. Disclosure Statement

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Dr. Bono reports personal fees from JAAOS, personal fees from Wolters Kluwer, personal fees from United Health Care, personal fees from Intrinsic Therapeutics, outside the submitted work.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Glenn

2. Surname (Last Name)  
   Buttermann

3. Date  
   08-January-2014

4. Are you the corresponding author?  
   [ ] Yes  ✔ No

   Corresponding Author’s Name  
   Kirkham Wood, MD

5. Manuscript Title  
   Operative versus Non-operative treatment of stable, neurologically intact thoracolumbar burst fractures: Sixteen to Twenty Two Year follow-up

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Dr. Buttermann has nothing to disclose.

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Harris
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<tr>
<td>Mitchel</td>
<td>Harris</td>
<td>14-July-2014</td>
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4. Are you the corresponding author? ☑ No

5. Manuscript Title

OPERATIVE COMPARED WITH NON-OPERATIVE TREATMENT OF THORACOLUMBAR BURST FRACTURES WITHOUT NEUROLOGICAL DEFICIT: A PROSPECTIVE AND RANDOMIZED STUDY WITH SIXTEEN TO TWENTY-TWO YEAR FOLLOW-UP

6. Manuscript Identifying Number (if you know it)

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Dr. Harris 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)  
   Christopher

2. Surname (Last Name)  
   Harrod

3. Date  
   24-January-2014

4. Are you the corresponding author?  
   ✔ Yes  
   No

5. Manuscript Title  
   Operative versus Non-operative treatment of stable, neurologically intact thoracolumbar burst fractures: Sixteen to Twenty Two Year follow-up.

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Dr. Harrod has nothing to disclose.

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1. Given Name (First Name)  
amir

2. Surname (Last Name)  
mehbod

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24-January-2014

4. Are you the corresponding author?  
   ✔ No

5. Manuscript Title  
   operative versus non operative treatment of stable neurologically intact thoracolumbar burst fractures: 16-20 year followup

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Dr. mehbod reports personal fees from stryker, zimmer, outside the submitted work; .

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.
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.

1. Identifying information.

2. The work under consideration for publication.

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

5. Relationships not covered above.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Rishabh

2. Surname (Last Name)  
   Phukan

3. Date  
   26-January-2014

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

Corresponding Author’s Name  
Dr. Kirkham Wood

5. Manuscript Title  
Operative Versus Non Operative Treatment of Stable Neurologically Intact Thoracolumbar Burst Fractures: 22 Year Follow-Up

6. Manuscript Identifying Number (if you know it)

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.)?

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Section 4. Intellectual Property -- Patents & Copyrights

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Rishabh Phukan has nothing to disclose.

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<td>4. Are you the corresponding author?</td>
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Dr. Shannon has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Kirkham

2. Surname (Last Name)  
   Wood

3. Date  
   02-January-2014

4. Are you the corresponding author?  
   Yes ✔ No

5. Manuscript Title  
   Operative versus non-operative treatment of neurologically intact thoracolumbar burst fractures: 16-22 year follow up

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If yes, please fill out the appropriate information below.

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Dr. Wood reports other from Trans S1, other from K2M; Synthes, grants from NIH Grant, other from OREF; Globus; AOSPINE, outside the submitted work.

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