ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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1. Identifying information.
2. The work under consideration for publication.
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Section 1. Identifying Information

1. Given Name (First Name)  Anica
2. Surname (Last Name)  Maggard
3. Date  29-August-2016
4. Are you the corresponding author?  Yes  ✔  No

Corresponding Author’s Name  Richard Skolasky, ScD.

5. Manuscript Title
Telephone-Based Intervention to Improve Rehabilitation Engagement After Spinal Stenosis Surgery. A Prospective Lagged Controlled Trial
6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest?  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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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. Maggard reports grants from AHRQ, during the conduct of the study.

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Section 1. Identifying Information

1. Given Name (First Name)  Richard
2. Surname (Last Name)  Skolasky
3. Date  29-August-2016
4. Are you the corresponding author?  Yes ☑ No

5. Manuscript Title
   Telephone-based intervention to improve rehabilitation engagement after spinal stenosis surgery: A prospective lagged controlled trial
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4. Are you the corresponding author? Yes [ ] No [X]  
   Corresponding Author’s Name: Richard L Skolasky

5. Manuscript Title  
   Telephone-Based Intervention to Improve Rehabilitation Engagement After Spinal Stenosis Surgery. A Prospective Lagged Controlled Trial

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1. Given Name (First Name)  
   Stephen

2. Surname (Last Name)  
   Wegener

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