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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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- **Royalties:** Funds are coming in to you or your institution due to your patent
**Section 1. Identifying Information**

1. Given Name (First Name)  
   Aina

2. Surname (Last Name)  
   Danielsson

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

5. Manuscript Title  
   Health related quality of life in adulthood in untreated and treated individuals with adolescent or juvenile idiopathic scoliosis

6. Manuscript Identifying Number (if you know it)

   Corresponding Author’s Name  
   Elias Diarbakerli

**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

**Section 4. Intellectual Property -- Patents & Copyrights**

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
   [ ] Yes  
   [✓] No
ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Danielsson 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)  
Paul

2. Surname (Last Name)  
Gerdhem

3. Date  
17-June-2017

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

   Corresponding Author’s Name  
   Elias Diarbakerli

5. Manuscript Title  
Health related quality of life in adulthood in untreated and treated individuals with adolescent or juvenile idiopathic scoliosis

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

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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<td>Swedish Society of Spinal surgeons</td>
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<td>Stockholm County Council</td>
<td>✓</td>
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Dr. Gerdhem reports grants from Swedish Research council, grants from Karolinska Institutet, grants from Swedish Society of Spinal surgeons, grants from Stockholm County Council, during the conduct of the study.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Anna

2. Surname (Last Name)  
   Grauers

3. Date  
   20-June-2017

4. Are you the corresponding author?  
   Yes ✔  No

   Corresponding Author’s Name  
   Elias Diarbakerli

5. Manuscript Title  
   Health related quality of life in adulthood in untreated and treated individuals with adolescent or juvenile idiopathic scoliosis

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### Section 1. Identifying Information

1. Given Name (First Name)  
   Elias

2. Surname (Last Name)  
   Diarbakerli

3. Date  
   13-June-2017

4. Are you the corresponding author?  
   Yes  ✔  No

5. Manuscript Title  
   Health related quality of life in adulthood in untreated and treated individuals with adolescent or juvenile idiopathic scoliosis

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