ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Martin
2. Surname (Last Name)  Herman
3. Date  13-April-2018
4. Are you the corresponding author?  ✔ Yes  No

5. Manuscript Title
Pediatric Cervical Spine Clearance: A Consensus Statement and Algorithm from the Pediatric Cervical Spine Clearance Working Group

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.

<table>
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<td>Texas Scottish Rite Hospital Foundation, Dallas, TX</td>
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<td></td>
<td></td>
<td>✔</td>
<td>Donate use of facilities and catering services</td>
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</table>

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Are there any relevant conflicts of interest?  No ✔ Yes

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  No ✔ Yes
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Dr. Herman reports grants from POSNA Start Up Grant, other from Texas Scottish Rite Hospital Foundation, Dallas, TX, during the conduct of the study; .

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<table>
<thead>
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<th>1. Given Name (First Name)</th>
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</tr>
</thead>
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<tr>
<td>2. Surname (Last Name)</td>
<td>Petrucci</td>
</tr>
<tr>
<td>3. Date</td>
<td>28-April-2018</td>
</tr>
<tr>
<td>4. Are you the corresponding author?</td>
<td>Yes ☑ No</td>
</tr>
<tr>
<td>Corresponding Author’s Name</td>
<td>Martin Herman</td>
</tr>
</tbody>
</table>

5. Manuscript Title
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6. Manuscript Identifying Number (if you know it)
JBJS-D-18-00217R1

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

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Dr. Petrucelli has nothing to disclose.

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Adam  

2. Surname (Last Name)  
   Alder  

3. Date  
   14-May-2018  

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

   Corresponding Author’s Name  
   Martin Herman  

5. Manuscript Title  
   Pediatric cervical spine clearance: a consensus statement and algorithm from the Pediatric Cervical Spine Clearance Working Group  

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Dr. Alder has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Robert

2. Surname (Last Name)  
   Bernstein

3. Date  
   10-May-2018

4. Are you the corresponding author?  
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   Corresponding Author’s Name  
   Martin Herman

5. Manuscript Title
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Dr. Bernstein has nothing to disclose.

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<th>1. Given Name (First Name)</th>
<th>Timothy</th>
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<tr>
<td>2. Surname (Last Name)</td>
<td>Booth</td>
</tr>
<tr>
<td>3. Date</td>
<td>10-May-2018</td>
</tr>
<tr>
<td>4. Are you the corresponding author?</td>
<td>Yes ☐   No ☑</td>
</tr>
</tbody>
</table>

- **Corresponding Author’s Name**: Martin Herman

5. **Manuscript Title**: Pediatric cervical spine clearance: a consensus statement and algorithm from the Pediatric Cervical Spine Clearance Working Group

6. **Manuscript Identifying Number (if you know it)**: JBJS-D-18-00217R1

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

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Dr. Booth has nothing to disclose.

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# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Section 1. Identifying Information

<table>
<thead>
<tr>
<th>1. Given Name (First Name)</th>
<th>2. Surname (Last Name)</th>
<th>3. Date</th>
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<tbody>
<tr>
<td>Bruno</td>
<td>Braga</td>
<td>27-April-2018</td>
</tr>
</tbody>
</table>

4. Are you the corresponding author? [No]
5. Manuscript Title
   Pediatric cervical spine clearance: a consensus statement and algorithm from the Pediatric Cervical Spine Clearance Working Group
6. Manuscript Identifying Number (if you know it)
   JBJS-D-18-00217R1

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Are there any relevant conflicts of interest? [No]

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? [No]
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Dr. Braga has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  Douglas
2. Surname (Last Name)  Brockmeyer
3. Date  27-April-2018
4. Are you the corresponding author?  Yes  No
   Corresponding Author’s Name  Martin Herman

5. Manuscript Title  Pediatric cervical spine clearance: a consensus statement and algorithm from the Pediatric Cervical Spine Clearance Working Group
6. Manuscript Identifying Number (if you know it)  JBJS-D-18-00217R1

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Dr. Brockmeyer has nothing to disclose.

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1. Given Name (First Name)  Patrick
2. Surname (Last Name)  Cahill
3. Date  27-April-2018
4. Are you the corresponding author?  Yes  No  ✔
   Corresponding Author’s Name  Martin Herman

5. Manuscript Title
   Pediatric cervical spine clearance: a consensus statement and algorithm from the Pediatric Cervical Spine Clearance Working Group

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<th>Other?</th>
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AAOS: Board or committee member
Journal of Bone and Joint Surgery - American: Editorial or governing board
Pediatric Orthopaedic Society of North America: Board or committee member
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Spine Deformity: Editorial or governing board

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Dr. Cahill reports personal fees from Biogen, Inc., personal fees from NuVasive, Inc, outside the submitted work; and AAOS: Board or committee member
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   John

2. Surname (Last Name)  
   Anderson

3. Date  
   01-May-2018

4. Are you the corresponding author?  
   Yes ☑ No

   Corresponding Author’s Name  
   Martin Herman

5. Manuscript Title  
   Pediatric cervical spine clearance: a consensus statement and algorithm from the Pediatric Cervical Spine Clearance Working Group

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Dr. Anderson reports other from American Academy of Pediatrics, outside the submitted work.

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Section 1. Identifying Information

1. Given Name (First Name) Jeanne
2. Surname (Last Name) Joglar
3. Date 14-May-2018
4. Are you the corresponding author? Yes No
   ✔
   Corresponding Author’s Name Martin Herman
5. Manuscript Title
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Are there any relevant conflicts of interest? Yes No

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Dr. Joglar has nothing to disclose.

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### ICMJE Form for Disclosure of Potential Conflicts of Interest

#### Section 1. Identifying Information

<table>
<thead>
<tr>
<th>1. Given Name (First Name)</th>
<th>2. Surname (Last Name)</th>
<th>3. Date</th>
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<tbody>
<tr>
<td>Julie</td>
<td>Leonard</td>
<td>04-May-2018</td>
</tr>
</tbody>
</table>

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

Corresponding Author’s Name

Martin Herman

5. Manuscript Title

Pediatric cervical spine clearance: a consensus statement and algorithm from the Pediatric Cervical Spine Clearance Working Group

6. Manuscript Identifying Number (if you know it)

JBJS-D-18-00217R1

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Are there any relevant conflicts of interest? [ ] Yes [x] No

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

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Leonard has nothing to disclose.

Evaluation and Feedback

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Martus
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Jeffrey
2. Surname (Last Name)  Martus
3. Date  28-April-2018
4. Are you the corresponding author?  Yes  No
   Corresponding Author’s Name  Martin Herman
5. Manuscript Title
   Pediatric cervical spine clearance: a consensus statement and algorithm from the Pediatric Cervical Spine Clearance Working Group
6. Manuscript Identifying Number (if you know it)
   JBJS-D-18-00217R1

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Are there any relevant conflicts of interest?  Yes  No

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Dr. Martus 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) Kush
2. Surname (Last Name) Mody
3. Date 27-April-2018
4. Are you the corresponding author? Yes ☑ No
   Corresponding Author’s Name Martin Herman
5. Manuscript Title Pediatric cervical spine clearance: a consensus statement and algorithm from the Pediatric Cervical Spine Clearance Working Group
6. Manuscript Identifying Number (if you know it) JBJS-D-18-00217R1

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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
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Mr. Mody 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)  Matthew
2. Surname (Last Name)  Moront
3. Date  21-May-2018
4. Are you the corresponding author?  Yes  No

Corresponding Author’s Name  Martin Herman

5. Manuscript Title
   Pediatric cervical spine clearance: a consensus statement and algorithm from the Pediatric Cervical Spine Clearance Working Group

6. Manuscript Identifying Number (if you know it)
   JBJS-D-18-00217R1

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Dr. Moront 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)  
   JO-ANN

2. Surname (Last Name)  
   NESIAMA

3. Date  
   27-April-2018

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

Corresponding Author’s Name  
Martin Herman

5. Manuscript Title  
Pediatric cervical spine clearance: a consensus statement and algorithm from the Pediatric Cervical Spine Clearance Working Group

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Dr. NESIAMA has nothing to disclose.

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**Issued:** The patent has been issued by the agency

**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
Section 1.  Identifying Information

1. Given Name (First Name) Joshua
2. Surname (Last Name) Pahys
3. Date 27-April-2018
4. Are you the corresponding author? Yes ☑ No
5. Manuscript Title
   Pediatric cervical spine clearance: a consensus statement and algorithm from the Pediatric Cervical Spine Clearance Working Group
6. Manuscript Identifying Number (if you know it)
   JBJS-D-18-00217R1

Corresponding Author’s Name
Martin Herman

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

Section 3.  Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the “Add +” box. You should report relationships that were present during the 36 months prior to publication.

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

If yes, please fill out the appropriate information below.

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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
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

☐ Yes, the following relationships/conditions/circumstances are present (explain below):

☐ No other relationships/conditions/circumstances that present a potential conflict of interest

At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Pahys reports personal fees from DePuy Synthes, personal fees from NuVasive, personal fees from Zimmer Biomet, outside the submitted work; .

Evaluation and Feedback

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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)  
   Jonathan

2. Surname (Last Name)  
   Phillips

3. Date  
   01-May-2018

4. Are you the corresponding author?  
   ☑ No  
   Corresponding Author’s Name  
   Marin Herman

5. Manuscript Title  
   Pediatric cervical spine clearance: a consensus statement and algorithm from the Pediatric Cervical Spine Clearance Working Group

6. Manuscript Identifying Number (if you know it)  
   JBJS-D-18-00217R1

**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?  
   ☑ No

**Section 3. Relevant financial activities outside the submitted work.**

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the “Add +” box. You should report relationships that were present during the 36 months prior to publication.

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

If yes, please fill out the appropriate information below.

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<td>Board Member</td>
</tr>
</tbody>
</table>
Section 4. Intellectual Property -- Patents & Copyrights

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

Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

□ Yes, the following relationships/conditions/circumstances are present (explain below):

✔ No other relationships/conditions/circumstances that present a potential conflict of interest

At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Phillips reports other from Biomet, other from OrthoPediatrics, other from OrthoPediatrics, other from Biomet, other from OrthoPediatrics, other from Springer Publishing, other from OrthoPediatrics, outside the submitted work.

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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) Richard
2. Surname (Last Name) Anderson
3. Date 05-May-2018
4. Are you the corresponding author? Yes No
   Corresponding Author’s Name Martin Herman
5. Manuscript Title
   Pediatric cervical spine clearance: a consensus statement and algorithm from the Pediatric Cervical Spine Clearance Working Group
6. Manuscript Identifying Number (if you know it) JBJS-D-18-00217R1

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

Section 3. Relevant financial activities outside the submitted work.

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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

Section 5. Relationships not covered above

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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Anderson has nothing to disclose.

Evaluation and Feedback

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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) Karl
2. Surname (Last Name) Rathjen
3. Date 09-May-2018
4. Are you the corresponding author? ☑ No
5. Manuscript Title
   Pediatric cervical spine clearance: a consensus statement and algorithm from the Pediatric Cervical Spine Clearance Working Group
6. Manuscript Identifying Number (if you know it)
   JBJS-D-18-00217R1

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Limb Lengthening and Reconstruction Society, Pediatric Orthopedic Society of North America, Scoliosis Research Society: Board or Committee Member.
Journal of Pediatric Orthopaedics, Spine: Editorial Board

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Dr. Rathjen reports other from Mati Therapeutics, outside the submitted work; and Limb Lengthening and Reconstruction Society, Pediatric Orthopedic Society of North America, Scoliosis Research Society: Board or Committee Member.

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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
## Section 1. Identifying Information

1. **Given Name (First Name)**
   Anthony

2. **Surname (Last Name)**
   Riccio

3. **Date**
   27-April-2018

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

   **Corresponding Author’s Name**
   Martin Herman

5. **Manuscript Title**
   Pediatric cervical spine clearance: a consensus statement and algorithm from the Pediatric Cervical Spine Clearance Working Group

6. **Manuscript Identifying Number (if you know it)**
   JBJS-D-18-00217R1

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Are there any relevant conflicts of interest?
- Yes
- No
   ✔

## Section 3. Relevant financial activities outside the submitted work.

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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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Section 4. Intellectual Property -- Patents & Copyrights

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

Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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Dr. Riccio reports personal fees from Elsevier, personal fees and non-financial support from DePuy Synthes, non-financial support from American Academy of Pediatrics, outside the submitted work.

Evaluation and Feedback

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**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) Jacob
2. Surname (Last Name) Schulz
3. Date 10-May-2018
4. Are you the corresponding author? ☑ No
5. Corresponding Author’s Name
   Martin Herman

5. Manuscript Title
   Pediatric cervical spine clearance: a consensus statement and algorithm from the Pediatric Cervical Spine Clearance Working Group
6. Manuscript Identifying Number (if you know it)
   JBJS-D-18-00217R1

**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? ☑ No

**Section 3. Relevant financial activities outside the submitted work.**

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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? ☑ No
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Section 6. Disclosure Statement

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Dr. Schulz 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)  
   Manish

2. Surname (Last Name)  
   Shah

3. Date  
   03-May-2018

4. Are you the corresponding author?  
   Yes  ☑️  No

   Corresponding Author’s Name
   Martin Herman

5. Manuscript Title  
   Pediatric cervical spine clearance: a consensus statement and algorithm from the Pediatric Cervical Spine Clearance Working Group

6. Manuscript Identifying Number (if you know it)  
   JBJS-D-18-00217R1

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Are there any relevant conflicts of interest?  
   Yes  ☑️  No

Section 3. Relevant financial activities outside the submitted work.

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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
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Section 1. Identifying Information

1. Given Name (First Name)  Paul
2. Surname (Last Name)  Sponseller
3. Date  29-April-2018
4. Are you the corresponding author?  Yes  No  ✔
   Corresponding Author’s Name  Martin Herman

5. Manuscript Title  Pediatric cervical spine clearance: a consensus statement and algorithm from the Pediatric Cervical Spine Clearance Working Group
6. Manuscript Identifying Number (if you know it)  JBJS-D-18-00217R1

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.)?  ■ Yes  ✔ No

Are there any relevant conflicts of interest?  ■ Yes  ✔ No

Section 3. Relevant financial activities outside the submitted work.

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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
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Dr. Sponseller has nothing to disclose.

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### Identifying Information

1. Given Name (First Name)  
   Anthony  

2. Surname (Last Name)  
   Stans  

3. Date  
   09-May-2018  

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

5. Manuscript Title  
   Pediatric cervical spine clearance: a consensus statement and algorithm from the Pediatric Cervical Spine Clearance Working Group  

6. Manuscript Identifying Number (if you know it)  
   JBJS-D-18-00217R1  

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Are there any relevant conflicts of interest?  
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   ✔ No  

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---

### Intellectual Property -- Patents & Copyrights

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

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Dr. Stans 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)  
   William

2. Surname (Last Name)  
   Warner

3. Date  
   04-May-2018

4. Are you the corresponding author?  
   Yes  ✔  No

   Corresponding Author’s Name  
   Martin Herman

5. Manuscript Title  
   Pediatric cervical spine clearance: a consensus statement and algorithm from the Pediatric Cervical Spine Clearance Working Group

6. Manuscript Identifying Number (if you know it)  
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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Warner has nothing to disclose.

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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)  Burt
2. Surname (Last Name)      Yaszay
3. Date                    01-May-2018
4. Are you the corresponding author?  Yes  ☑  No

5. Manuscript Title
   Pediatric cervical spine clearance: a consensus statement and algorithm from the Pediatric Cervical Spine Clearance Working Group
6. Manuscript Identifying Number (if you know it)
   JBJS-D-18-00217R1

Section 2. The Work Under Consideration for Publication

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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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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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Dr. Yaszay reports grants and personal fees from Depuy Synthes, grants and personal fees from Nuvasive, grants and personal fees from K2M, personal fees from Globus, personal fees from Orthopediatrics, personal fees from Stryker, personal fees from Biogen, personal fees from Ethicon, outside the submitted work; In addition, Dr. Yaszay has a patent K2M with royalties paid.
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1. Identifying information.

2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking “No” means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check “Yes”.

3. Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

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Brown
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Kristin

2. Surname (Last Name)  
   Brown

3. Date  
   01-May-2018

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   Yes ✔ No

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   Martin Herman

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Kristin Brown has nothing to disclose.

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   Darshan

2. Surname (Last Name)  
   Parikh

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