ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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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
1. Given Name (First Name)  
Paul

2. Surname (Last Name)  
Arnold

3. Date  
19-August-2014

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

Corresponding Author’s Name  
Jeff Rihn

5. Manuscript Title  
Degenerative Lumbar Scoliosis

6. Manuscript Identifying Number (if you know it)

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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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☑ Yes  ☐ No

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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

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Section 6. Disclosure Statement

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Dr. Arnold reports personal fees and other from AOSpine North America, personal fees from Medtronic Sofamor Danek, personal fees from Lifespine, personal fees from Integra Life, personal fees from SpineWave, personal fees from Stryker Spine, personal fees from FzioMed, personal fees from AOSpine North America, personal fees from MIEMS, grants from AO Spine North America, personal fees from University of Missouri Honorarium, other from Z-Plasty, outside the submitted work.
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Section 1. Identifying Information

1. Given Name (First Name) Jeff
2. Surname (Last Name) Rihn
3. Date 19-August-2014
4. Are you the corresponding author? Yes ☑ No
5. Manuscript Title Degenerative Lumbar 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

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The Spine Journal—editor
North American Spine Society—Board

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Dr. Rihn reports personal fees from Pfizer, grants from Depuy, outside the submitted work; and The Spine Journal—editor
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Section 1. Identifying Information

1. Given Name (First Name)  
   Charles

2. Surname (Last Name)  
   Reitman

3. Date  
   14-May-2014

4. Are you the corresponding author?  
   ❑ Yes  ❑ No
   Corresponding Author’s Name  
   Jeff Rihn

5. Manuscript Title  
   Degenerative Lumbar Scoliosis

6. Manuscript Identifying Number (if you know it)

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Dr. Reitman has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
   John

2. Surname (Last Name)  
   Koerner

3. Date  
   19-August-2014

4. Are you the corresponding author?  
   ✔ Yes  
   No

Corresponding Author's Name  
Jeff Rihn

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✔ Yes  
No

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✔ Yes  
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