

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name)

Bilal

2. Surname (Last Name)

Butt

3. Date

20-July-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Ilyas Aleem

5. Manuscript Title

Stereotactic Navigation in Anterior Cervical Spine Surgery: Surgical Setup and Technique

6. Manuscript Identifying Number (if you know it)

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Dr. Butt has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Joshua

2. Surname (Last Name)

Piche

3. Date

20-July-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Ilyas Aleem

5. Manuscript Title

Stereotactic Navigation in Anterior Cervical Spine Surgery: Surgical Setup and Technique

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Section 1. Identifying Information

1. Given Name (First Name)
Paul

2. Surname (Last Name)
Gagnet

3. Date
20-July-2020

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Ilyas Aleem

5. Manuscript Title
Stereotactic Navigation in Anterior Cervical Spine Surgery: Surgical Setup and Technique

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Rakesh

2. Surname (Last Name)
Patel

3. Date
20-July-2020

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☐ Yes

☒ No

Corresponding Author's Name
Ilyas Aleem

5. Manuscript Title
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1. Given Name (First Name)
Ilyas

2. Surname (Last Name)
Aleem

3. Date
20-July-2020

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

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Stereotactic Navigation in Anterior Cervical Spine Surgery: Surgical Setup and Technique

6. Manuscript Identifying Number (if you know it)
20-580-R1

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

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
OrthoFix	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Research Funding

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Dr. Aleem reports other from OrthoFix, outside the submitted work; .

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