

## 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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#### 4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

#### 5. Relationships not covered above.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Kingsley R.

2. Surname (Last Name)  
Chin

3. Date  
13-May-2020

4. Are you the corresponding author?  Yes  No

5. Manuscript Title  
Greater Than 5 -Year Follow-Up of Outpatient L4-L5 Lumbar Interspinous Fixation for Degenerative Spinal Stenosis Using the INSPAN device

6. Manuscript Identifying Number (if you know it)

### Section 2. The Work Under Consideration for Publication

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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.

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

### 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 6. Disclosure Statement

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

Dr. Chin reports other from KICVentures, outside the submitted work; .

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Jason A.	2. Surname (Last Name) Seale	3. Date 13-May-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Kingsley R. Chin
5. Manuscript Title Greater Than 5 -Year Follow-Up of Outpatient L4-L5 Lumbar Interspinous Fixation for Degenerative Spinal Stenosis Using the INSPAN device		
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Dr. Seale has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name) Fabio JR	2. Surname (Last Name) Pencle	3. Date 13-May-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Kingsley R. Chin
5. Manuscript Title Greater Than 5 -Year Follow-Up of Outpatient L4-L5 Lumbar Interspinous Fixation for Degenerative Spinal Stenosis Using the INSPAN device		
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Dr. Pencle 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)

Amala

2. Surname (Last Name)

Benny

3. Date

13-May-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

Kingsley R. Chin

5. Manuscript Title

Greater Than 5 -Year Follow-Up of Outpatient L4-L5 Lumbar Interspinous Fixation for Degenerative Spinal Stenosis Using the INSPAN device

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