

ICMJE DISCLOSURE FORM

Date: 2023-11-12

Your Name: Xiaowen Liu

Manuscript Title: Evaluation and Analysis of the Surgical Treatment for Multi-level or Single-level Lumbar Degenerative Diseases, Based on the Radiograph.

Manuscript number (if known): QIMS-23-1108

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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Date: 2023-11-12

Your Name: Tianyi Zhao

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Date: 2023-11-12

Your Name: Chenxi Sun

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Date: 2023-11-12

Your Name: Jiangang Shi

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 Your Name: Guodong Shi
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