Date	e: Apr. 29 , 2021_		
	r Name: Sheng		
Lum Met	bar Decompression Lamine a-analysis	ctomy for the Treatment o	ological Outcomes of Full-Endoscopic Versus Microscopic of Lumbar Spinal Stenosis: A Systematic Review and
Mar	nuscript number (if known):	APM-21-198	
rela part to tr rela	ted to the content of your n ies whose interests may be ransparency and does not no tionship/activity/interest, it	nanuscript. "Related" mea affected by the content o ecessarily indicate a bias. t is preferable that you do	relationships/activities/interests listed below that are ans any relation with for-profit or not-for-profit third f the manuscript. Disclosure represents a commitment If you are in doubt about whether to list a so. ps/activities/interests as they relate to the current
man	nuscript only.		·
med In it	lication, even if that medica	ntion is not mentioned in to	all relationships with manufacturers of antihypertensive he manuscript.
		Name all autities with	Specifications/Comments
		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initia	al planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	XNone	
		Time frame: pas	t 36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	X_None	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone			
	lectures, presentations,				
	speakers bureaus,				
	manuscript writing or				
	educational events				
6	Payment for expert	XNone			
	testimony				
7	Support for attending meetings and/or travel	XNone			
	G ,				
8	Patents planned, issued or	_XNone			
	pending				
9	Participation on a Data	XNone			
	Safety Monitoring Board or				
	Advisory Board				
10	Leadership or fiduciary role	XNone			
	in other board, society,				
	committee or advocacy				
1.1	group, paid or unpaid	V. Nava			
11	Stock or stock options	XNone			
12	Possint of agricment	V None			
12	Receipt of equipment, materials, drugs, medical	XNone			
	writing, gifts or other				
	services				
13	Other financial or non-	X None			
	financial interests				
Ple	ase summarize the above co	nflict of interest in the fo	llowing box:		
'	None.				

Date	e: Apr. 29 th , 2021_		
You	r Name: Tsz Ng	gai Mok	
Man	nuscript Title: A Compa	rison of Clinical and Radiol	ogical Outcomes of Full-Endoscopic Versus Microscopic
Lum	bar Decompression Lamine	ctomy for the Treatment o	f Lumbar Spinal Stenosis: A Systematic Review and
Met	a-analysis		
Man	nuscript number (if known):	APM-21-198	
relate part to trelate	ted to the content of your n ies whose interests may be ransparency and does not no tionship/activity/interest, it	nanuscript. "Related" mean affected by the content of ecessarily indicate a bias. I is preferable that you do	relationships/activities/interests listed below that are ins any relation with for-profit or not-for-profit third the manuscript. Disclosure represents a commitment of you are in doubt about whether to list a so. s/activities/interests as they relate to the current
to the med	ne epidemiology of hyperter lication, even if that medica	nsion, you should declare a tion is not mentioned in th port for the work reported	lefined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive ne manuscript. In this manuscript without time limit. For all other items,
		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
		none (add rows as	,
		needed)	
		Time frame: Since the initial	planning of the work
1	All support for the present	X None	promissing or the trons
1	manuscript (e.g., funding,	^_None	
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame, nech	26 months
2	Crants or contracts from	Time frame: past	56 months
2	Grants or contracts from	X_None	
	any entity (if not indicated		
2	in item #1 above).	V None	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	
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5	Payment or honoraria for	XNone			
	lectures, presentations,				
	speakers bureaus,				
	manuscript writing or				
	educational events				
6	Payment for expert	XNone			
	testimony				
7	Support for attending meetings and/or travel	XNone			
8	Patents planned, issued or	_XNone			
	pending				
9	Participation on a Data	XNone			
	Safety Monitoring Board or				
	Advisory Board				
10	Leadership or fiduciary role	XNone			
	in other board, society,				
	committee or advocacy group, paid or unpaid				
11	Stock or stock options	X None			
11	Stock of Stock options	XNOTIE			
12	Receipt of equipment,	X None			
	materials, drugs, medical				
	writing, gifts or other				
	services				
13	Other financial or non-	XNone			
	financial interests				
	Please summarize the above conflict of interest in the following box: None.				

None.		

Date	e: Apr. 29 th , 2021_		
	· Name: Qiyu I		
Lum	bar Decompression Lamine	ctomy for the Treatment o	logical Outcomes of Full-Endoscopic Versus Microscopic of Lumbar Spinal Stenosis: A Systematic Review and
Man	a-analysis uscript number (if known):	APM-21-198	
relat parti to tr	ed to the content of your nies whose interests may be	nanuscript. "Related" mea affected by the content o ecessarily indicate a bias.	relationships/activities/interests listed below that are ins any relation with for-profit or not-for-profit third f the manuscript. Disclosure represents a commitment If you are in doubt about whether to list a so.
	following questions apply t uscript only.	o the author's relationship	os/activities/interests as they relate to the current
to th med In ite	e epidemiology of hyperte ication, even if that medica	nsion, you should declare tion is not mentioned in t port for the work reported	defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive he manuscript. d in this manuscript without time limit. For all other items,
		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initia	al planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	XNone	
		Time frame: pas	t 36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	X_None	
3	Royalties or licenses	XNone	

Consulting fees

_X__None

5	Payment or honoraria for	XNone			
	lectures, presentations,				
	speakers bureaus,				
	manuscript writing or				
	educational events				
6	Payment for expert	XNone			
	testimony				
7	Support for attending meetings and/or travel	XNone			
8	Patents planned, issued or	_XNone			
	pending				
9	Participation on a Data	XNone			
	Safety Monitoring Board or				
	Advisory Board				
10	Leadership or fiduciary role	XNone			
	in other board, society,				
	committee or advocacy group, paid or unpaid				
11	Stock or stock options	X None			
11	Stock of Stock options	XNOTIE			
12	Receipt of equipment,	X None			
	materials, drugs, medical				
	writing, gifts or other				
	services				
13	Other financial or non-	XNone			
	financial interests				
	Please summarize the above conflict of interest in the following box: None.				

None.		

Date	e: Apr. 29 , 2021_		
	r Name: Layla		
Lum Met	bar Decompression Lamine a-analysis.	ctomy for the Treatment o	ological Outcomes of Full-Endoscopic Versus Microscopic of Lumbar Spinal Stenosis: A Systematic Review and
Mar	nuscript number (if known):	APM-21-198	
rela part to tr rela	ted to the content of your n ies whose interests may be ransparency and does not no tionship/activity/interest, it	nanuscript. "Related" mea affected by the content o ecessarily indicate a bias. it is preferable that you do	
	following questions apply t nuscript only.	o the author's relationship	os/activities/interests as they relate to the <u>current</u>
med In it	lication, even if that medica	tion is not mentioned in t	all relationships with manufacturers of antihypertensive he manuscript. d in this manuscript without time limit. For all other items
		Name all entities with	Specifications/Comments
		whom you have this relationship or indicate none (add rows as needed)	(e.g., if payments were made to you or to your institution)
		Time frame: Since the initia	al planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	XNone	
		Time frame: pas	t 36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	X_None	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone			
	lectures, presentations,				
	speakers bureaus,				
	manuscript writing or				
	educational events				
6	Payment for expert	XNone			
	testimony				
7	Support for attending meetings and/or travel	XNone			
8	Patents planned, issued or	_XNone			
	pending				
9	Participation on a Data	XNone			
	Safety Monitoring Board or				
	Advisory Board				
10	Leadership or fiduciary role	XNone			
	in other board, society,				
	committee or advocacy group, paid or unpaid				
11	Stock or stock options	X None			
11	Stock of Stock options	XNOTIE			
12	Receipt of equipment,	X None			
	materials, drugs, medical				
	writing, gifts or other				
	services				
13	Other financial or non-	XNone			
	financial interests				
	Please summarize the above conflict of interest in the following box: None.				

None.		

Date	e: Apr. 29 , 2021_		
You	r Name: Xiaofe	eng Lai	
Lum Met	bar Decompression Lamine a-analysis	ctomy for the Treatment o	logical Outcomes of Full-Endoscopic Versus Microscopic of Lumbar Spinal Stenosis: A Systematic Review and
Mar	nuscript number (if known):	APM-21-198	
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	rollowing questions apply t luscript only.	o the author's relationship	os/activities/interests as they relate to the <u>current</u>
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		Name all autities with	Su asifications/Commonts
		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initia	al planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	XNone	
		Time frame: pas	t 36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	X_None	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone		
	lectures, presentations,			
	speakers bureaus,			
	manuscript writing or			
	educational events			
6	Payment for expert	XNone		
	testimony			
7	Support for attending meetings and/or travel	XNone		
8	Patents planned, issued or	_XNone		
	pending			
9	Participation on a Data	XNone		
	Safety Monitoring Board or			
	Advisory Board			
10	Leadership or fiduciary role	XNone		
	in other board, society,			
	committee or advocacy group, paid or unpaid			
11	Stock or stock options	X None		
11	Stock of Stock options	XNOTIE		
12	Receipt of equipment,	X None		
	materials, drugs, medical			
	writing, gifts or other			
	services			
13	Other financial or non-	XNone		
	financial interests			
	Please summarize the above conflict of interest in the following box: None.			

None.		

Date	e: Apr. 29 , 2021_		
You	r Name: Tat Ha	ang Sin	
Lum Met	bar Decompression Lamine a-analysis	ctomy for the Treatment o	logical Outcomes of Full-Endoscopic Versus Microscopic of Lumbar Spinal Stenosis: A Systematic Review and
Mar	nuscript number (if known):	APM-21-198	
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		Name all autities with	Succifications/Commonts
		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initia	al planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	XNone	
		Time frame: past	t 36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	X_None	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone		
	lectures, presentations,			
	speakers bureaus,			
	manuscript writing or			
	educational events			
6	Payment for expert	XNone		
	testimony			
7	Support for attending meetings and/or travel	XNone		
8	Patents planned, issued or	_XNone		
	pending			
9	Participation on a Data	XNone		
	Safety Monitoring Board or			
	Advisory Board			
10	Leadership or fiduciary role	XNone		
	in other board, society,			
	committee or advocacy group, paid or unpaid			
11	Stock or stock options	X None		
11	Stock of Stock options	XNOTIE		
12	Receipt of equipment,	X None		
	materials, drugs, medical			
	writing, gifts or other			
	services			
13	Other financial or non-	XNone		
	financial interests			
	Please summarize the above conflict of interest in the following box: None.			

None.		

Date	e: Apr. 29 , 2021_		
	r Name: Jialin		
Lum Met	nbar Decompression Lamine ta-analysis.	ctomy for the Treatment o	logical Outcomes of Full-Endoscopic Versus Microscopic of Lumbar Spinal Stenosis: A Systematic Review and
Mar	nuscript number (if known):	APM-21-198	
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		Name all entities with	Superifications/Comments
		whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initia	l planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	XNone	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	X_None	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone		
	lectures, presentations,			
	speakers bureaus,			
	manuscript writing or			
	educational events			
6	Payment for expert	XNone		
	testimony			
7	Support for attending meetings and/or travel	XNone		
8	Patents planned, issued or	_XNone		
	pending			
9	Participation on a Data	XNone		
	Safety Monitoring Board or			
	Advisory Board			
10	Leadership or fiduciary role	XNone		
	in other board, society,			
	committee or advocacy group, paid or unpaid			
11	Stock or stock options	X None		
11	Stock of Stock options	XNOTIE		
12	Receipt of equipment,	X None		
	materials, drugs, medical			
	writing, gifts or other			
	services			
13	Other financial or non-	XNone		
	financial interests			
	Please summarize the above conflict of interest in the following box: None.			

None.		

Date	e: Apr. 29 ^{\\\} , 2021_		
	Name: Shinn		
Lum	bar Decompression Lamine		ological Outcomes of Full-Endoscopic Versus Microscopic of Lumbar Spinal Stenosis: A Systematic Review and
	a-analysis uscript number (if known):	ADM 21 109	
IVIdi	iuscript number (ii known):	APIVI-21-190	
relat part to tr	ted to the content of your nies whose interests may be	nanuscript. "Related" mea affected by the content o ecessarily indicate a bias.	relationships/activities/interests listed below that are ans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment If you are in doubt about whether to list a so.
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to th	•	nsion, you should declare	defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive the manuscript.
	em #1 below, report all sup time frame for disclosure is	· · ·	d in this manuscript without time limit. For all other items
		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
		none (add rows as	
		needed)	
		Time frame: Since the initia	al planning of the work
1	All support for the present	XNone	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
2		Time frame: pas	t 36 months
2	Grants or contracts from	X_None	
	any entity (if not indicated		
2	in item #1 above).	V N	
3	Royalties or licenses	XNone	

Consulting fees

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5	Payment or honoraria for	XNone		
	lectures, presentations,			
	speakers bureaus,			
	manuscript writing or			
	educational events			
6	Payment for expert	XNone		
	testimony			
7	Support for attending meetings and/or travel	XNone		
8	Patents planned, issued or	_XNone		
	pending			
9	Participation on a Data	XNone		
	Safety Monitoring Board or			
	Advisory Board			
10	Leadership or fiduciary role	XNone		
	in other board, society,			
	committee or advocacy group, paid or unpaid			
11	Stock or stock options	X None		
11	Stock of Stock options	XNOTIE		
12	Receipt of equipment,	X None		
	materials, drugs, medical			
	writing, gifts or other			
	services			
13	Other financial or non-	XNone		
	financial interests			
	Please summarize the above conflict of interest in the following box: None.			

None.		

Date	e: Apr. 29 th , 2021_		
Your	r Name: Jieruo	Li	
			logical Outcomes of Full-Endoscopic Versus Microscopic
Lum	bar Decompression Lamine	ctomy for the Treatment o	of Lumbar Spinal Stenosis: A Systematic Review and
Meta	a-analysis		
Man	uscript number (if known):	APM-21-198	
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		Name all entities with	Specifications/Comments
		whom you have this	Specifications/Comments (e.g., if payments were made to you or to your
		relationship or indicate	institution)
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		needed)	
		Time frame: Since the initia	l planning of the work
1	All support for the present	X None	
_	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	t 36 months
2	Grants or contracts from	X_None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
_		V N	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or	_XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	X None	
11	Stock of Stock options	XNOTIE	
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
	ase summarize the above co	nflict of interest in the fol	lowing box:

None.		

Date	e: Apr. 29 th , 2021_		
You	r Name: Hao W	/u	
Man	uscript Title: A Compa	rison of Clinical and Radiol	ogical Outcomes of Full-Endoscopic Versus Microscopic
Lum	bar Decompression Lamine	ctomy for the Treatment o	f Lumbar Spinal Stenosis: A Systematic Review and
Met	a-analysis		
Man	uscript number (if known):	APM-21-198	
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		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
		none (add rows as	,
		needed)	
		Time frame: Since the initial	planning of the work
1	All support for the present	X None	
_	manuscript (e.g., funding,	XNone	
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	X None	
-	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	X None	
3	no parties of notifies		
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
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7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or	_XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	X None	
11	Stock of Stock options	XNOTIE	
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
	ase summarize the above co	nflict of interest in the fol	lowing box:

None.		