

#### **Instructions**

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### 3. Relevant financial activities outside the submitted work.

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# 4. Intellectual Property.

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earning royalties or not **Royalties:** Funds are coming in to you or your institution due to your

patent

Carrasco 1



Section 1.	Identifying Inform	ation		
1. Given Name (Fii Roberto	, ,		ne (Last Name)	3. Date 20-August-2020
4. Are you the cor	responding author?	✓ Yes	No	
decompression a	ck and Leg Pain as Pred	iscectomy:	rajectories of Poor Outcome after Single : A Study of 3308 Patients	e Level Lumbar Micro-
Section 2				
any aspect of the s statistical analysis, Are there any relo	titution <b>at any time</b> recei ubmitted work (including	ve payment but not lim	tion for Publication  t or services from a third party (government, nited to grants, data monitoring board, study res   No	
Section 3.	Relevant financial	activities	outside the submitted work.	
of compensation clicking the "Add	) with entities as descri	bed in the port relation	e to indicate whether you have financial instructions. Use one line for each entitionships that were <b>present during the 3</b> Yes   No	y; add as many lines as you need by
Section 4.	Intellectual Proper	tu Data	ents & Conswights	
	Intellectual Proper	ty Pate	ants & Copyrights	
Do you have any	patents, whether plani	ned, pendii	ng or issued, broadly relevant to the wo	ork? Yes Vo

Carrasco 2



Section 5. Relationships not sovered above
Relationships not covered above
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?
Yes, the following relationships/conditions/circumstances are present (explain below):
✓ No other relationships/conditions/circumstances that present a potential conflict of interest
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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.
Mr Carrasco has nothing to disclose.

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Carrasco 3



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Elmalky

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**Royalties:** Funds are coming in to you or your institution due to your natent

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administrative support, etc.



Section 1.	Identifying Inform	ation	
1. Given Name (Fir Mahmoud	rst Name)	2. Surname (Last Name) Elmalky	3. Date 23-June-2020
4. Are you the corr	responding author?	Yes ✓ No	Corresponding Author's Name Roberto Carrasco
		-	oor Outcome after Single Level Lumbar Micro-
•	ntifying Number (if you kn	·	
Section 2.	The Work Under Co	onsideration for Public	ation
any aspect of the si statistical analysis,	ubmitted work (including	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,
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Do you have any			oadly relevant to the work? Yes V No

Elmalky 2



Section 5.			
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Mr Elmalky has r	nothing to disclose		

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sabou 1



Section 1.	Identifying Inform	ation		
1. Given Name (Fi silviu	rst Name)	2. Surname (Last Name) sabou		3. Date 04-September-2020
4. Are you the corresponding author?		☐ Yes ✓ No	Corresponding Author's Nan Roberto Carrasco	ne
		•	oor Outcome after Single Le	evel Lumbar Micro-
•	ntifying Number (if you kn	•		
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Section 2.	The Work Under Co	onsideration for Public	cation	
any aspect of the s statistical analysis,	stitution <b>at any time</b> recei ubmitted work (including	ive payment or services from but not limited to grants, da		nmercial, private foundation, etc.) for sign, manuscript preparation,
Section 3.	Relevant financial	activities outside the s	ubmitted work	
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Section 4.	Intellectual Brown	ty Patents & Copyrig	uhte .	
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Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work?	Yes ✓ No

sabou 2



Section 5.			
Section 5.	Relationships not covered above		
	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?		
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):		
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Dr. sabou has no	othing to disclose.		

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Leach 1



Section 1.	Identifying Inform	ation	
1. Given Name (Fi John	rst Name)	2. Surname (Last Name) Leach	3. Date 23-June-2020
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Roberto Carrasco
		•	oor Outcome after Single Level Lumbar Micro-
6. Manuscript Idei JSS-19-462	ntifying Number (if you kn	now it)	
Section 2.	The Work Under Co	onsideration for Public	ation
any aspect of the s statistical analysis,	ubmitted work (including	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,
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	intellectual Proper	ty Patents & Copyrig	nts ———
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes Vo

Leach 2



Section 5. Polationships not severed above				
Relationships not covered above				
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Verma 1



Section 1.	Identifying Inform	ation		
1. Given Name (Fir Rajat	st Name)	2. Surname (Last Name) Verma	3. Date 27-March-2020	
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Roberto Carrasco	
5. Manuscript Title Concomitant Back and Leg Pain as Predictors for trajectories of Poor Outcome after Single Level Lumbar Micro- Decompression alone and with Micro-discectomy				
6. Manuscript Iden JSS-19-462	tifying Number (if you kn	ow it)		
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Did you or your inst any aspect of the su statistical analysis, e	titution <b>at any time</b> recei ubmitted work (including	but not limited to grants, da	cation  a third party (government, commercial, private foundation, etc.) fo ta monitoring board, study design, manuscript preparation,	or
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Verma 2



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**Non-Financial Support:** Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

Other: Anything not covered under the previous three boxes

**Pending:** The patent has been filed but not issued **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

Mohammad 1



Section 1.	Identifying Inform	ation		
1. Given Name (Fire Saeed	st Name)	2. Surname (Last Name) Mohammad	3. Date 23-June-2020	
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Roberto Carrasco	
		-	or Outcome after Single Level Lumbar Mic	:ro-
6. Manuscript Iden JSS-19-462	tifying Number (if you kn	ow it)		
Section 2				
Section 2.	The Work Under Co	onsideration for Public	ation	
any aspect of the su statistical analysis, e	ubmitted work (including	but not limited to grants, da	a third party (government, commercial, private a monitoring board, study design, manuscript	
Section 3.	Relevant financial	activities outside the s	ubmitted work.	
of compensation) clicking the "Add	) with entities as descri	bed in the instructions. Us port relationships that wer	ether you have financial relationships (rega e one line for each entity; add as many line e <b>present during the 36 months prior to</b>	es as you need by
, , , , , , , , , , , , , , , , , , , ,				
Section 4.	Intellectual Proper	ty Patents & Copyrig	hts	
Do you have any	patents, whether planr	ned, pending or issued, br	oadly relevant to the work? Yes	No

Mohammad 2



Section 5.			
Section 5.	Relationships not covered above		
	elationships or activities that readers could perceive to have influenced, or that give the appearance of ncing, what you wrote in the submitted work?		
Yes, the follow	ving relationships/conditions/circumstances are present (explain below):		
✓ No other relat	tionships/conditions/circumstances that present a potential conflict of interest		
	At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.		
Section 6.	Disclosure Statement		
Based on the abo below.	ve disclosures, this form will automatically generate a disclosure statement, which will appear in the box		
Mr S Mohammad	has nothing to disclose		

## **Evaluation and Feedback**

Please visit <a href="http://www.icmje.org/cgi-bin/feedback">http://www.icmje.org/cgi-bin/feedback</a> to provide feedback on your experience with completing this form.

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#### **Instructions**

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

# Identifying information.

# 2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

### Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

# 4. Intellectual Property.

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

# Relationships not covered above.

Use this section to report other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work.

#### Definitions.

**Entity:** government agency, foundation, commercial sponsor, academic institution, etc.

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**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

Siddique 1



Section 1.	Identifying Inform	ation		
1. Given Name (First Name) Irfan		2. Surname (Last Name) Siddique	3. Date 17-February-2020	
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Roberto Carrasco	
5. Manuscript Title Concomitant Back and Leg Pain as Predictors for trajectories of Poor Outcome after Single Level Lumbar Micr decompression alone and with Micro-discectomy: A Study of 3308 Patients				
6. Manuscript Identifying Number (if you know it) JSS-19-462				
	ı			
Section 2. The Work Under Consideration for Publication				
Did you or your institution <b>at any time</b> 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				
Section 3. Relevant financial activities outside the submitted work.				
Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were <b>present during the 36 months prior to publication</b> .  Are there any relevant conflicts of interest? Yes Vo				
Section 4.				
occion i.	Intellectual Proper	ty Patents & Copyric	ints	
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo				

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Section 5. Relationships not severed above			
Relationships not covered above			
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✓ No other relationships/conditions/circumstances that present a potential conflict of interest			
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements On occasion, journals may ask authors to disclose further information about reported relationships.			
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. Siddique has nothing to disclose.			

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