

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.

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earning royalties or not

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

patent

Macki 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Mohamed	2. Surname (Last Name) Macki	3. Date 26-August-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Victor Chang
interbody fusion		rge disposition following minimally invasive lumbar
6. Manuscript Identifying Number (if you kr JSS-20-596-R2	now it)	_
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Section 4. Intellectual Proper	rty Patents & Copyric	ahts
Do you have any patents, whether plan		

Macki 2



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Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Macki has nothing to disclose.

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Fadel 1



Section 1. Identifying Inforn	nation	
1. Given Name (First Name) Hassan	2. Surname (Last Name) Fadel	3. Date 31-August-2020
4. Are you the corresponding author?	Yes No	Corresponding Author's Name Victor Chang
Manuscript TitleThe influence of sagittal spinopelvic ali interbody fusion	gnment on patient discha	arge disposition following minimally invasive lumbar
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Fadel 2



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Dr. Fadel has not	thing to disclose.			

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Hamilton 1



Section 1. Identifying Inform	nation	
Given Name (First Name) Travis	Surname (Last Name) Hamilton	3. Date 31-August-2020
4. Are you the corresponding author?	☐ Yes 🗸 No	Corresponding Author's Name Victor Chang
Interbody Fusion		arge Disposition Following Minimally Invasive Lumbar
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Lim 1



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1. Given Name (First Name) Seokchun	2. Surname (Last Name) Lim	3. Date 26-August-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Victor Chang
interbody fusion		rge disposition following minimally invasive lumbar
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Lim 2



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Massie 1



Massie

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Inform	ation	
1. Given Name (First Name) Lara	2. Surname (Last Name) Massie	3. Date 26-August-2020
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Victor Chang
 Manuscript Title The influence of sagittal spinopelvic aliginterbody fusion 	nment on patient discha	rge disposition following minimally invasive lumbar
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2



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Zakaria 1



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Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No

Zakaria 2



Section 5. Polotionships not sovered above
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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.

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Pawloski 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Jacob	2. Surname (Last Name) Pawloski	3. Date 31-August-2020
4. Are you the corresponding author?	☐ Yes 🗸 No	Corresponding Author's Name Victor Chang
Interbody Fusion		arge Disposition Following Minimally Invasive Lumbar
6. Manuscript Identifying Number (if you kr JSS-20-596-R2	now it)	_
Section 2. The Work Under C	onsideration for Public	sakion
Did you or your institution at any time rece any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	ive payment or services from g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Section 3. Relevant financial	activities outside the	submitted work.
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Chang 1



Section 1.	Identifying Inform	ation			
1. Given Name (Fi Victor	irst Name)	2. Surname (Last Name Chang)	3. Date 31-August-2020	
4. Are you the cor	responding author?	✓ Yes No			
5. Manuscript Title The influence of sagittal spinopelvic alignment on patient discharge disposition following minimally invasive lumbar interbody fusion					
6. Manuscript Ide JSS-20-596-R2	ntifying Number (if you kr	now it)			
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any aspect of the s statistical analysis,	stitution at any time rece submitted work (including	ive payment or services from the payment or services from the payment of the paym	om a third party (governm , data monitoring board, st	ent, commercial, private foundation, etc.) for tudy design, manuscript preparation,	
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Are there any relevant conflicts of interest?					
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Globus Medical		✓		Consultant	
Section 4.	Intellectual Proper	ty Patents & Copy	vrights		
Do you have any	patents, whether plan	ned, pending or issued	, broadly relevant to the	work? Yes V No	

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Section 5. Polationships not sovered above
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