

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.

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

Shah 1



Section 1. Identifying Inform	nation			
1. Given Name (First Name) Jay	2. Surname (Last Name) Shah	3. Date 22-December-2020		
4. Are you the corresponding author?	✓ Yes No			
5. Manuscript Title Esophagopharyngeal Perforation and	Prevertebral Abscess after Anterior Cervical Discector	my and Fusion: A Case Report		
6. Manuscript Identifying Number (if you k	now it)			
Section 2. The Work Under C	to the stantant Dalitantan			
Did you or your institution at any time 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.			
of compensation) with entities as desc	in the table to indicate whether you have financial registed in the instructions. Use one line for each entity; eport relationships that were present during the 36 pest?	add as many lines as you need by		
Section 4. Intellectual Prope	rty Patents & Copyrights			
	nned, pending or issued, broadly relevant to the work	☐ Yes ✓ No</th		

Shah 2



Section 5.					
Section 5.	Relationships not covered above				
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Dr. Shah has noth	ning to disclose.				

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

Romanelli 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Filippo	2. Surname (Last Name) Romanelli	3. Date 05-January-2021
4. Are you the corresponding author?	☐ Yes 🗸 No	Corresponding Author's Name Jay Shah
5. Manuscript Title Esophagopharyngeal Perforation and I	Prevertebral Abscess after A	Anterior Cervical Discectomy and Fusion: A Case Report
6. Manuscript Identifying Number (if you k	now it)	
Section 2. The Work Under C	onsideration for Public	cation
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Section 3. Relevant financial	activities outside the s	ubmitted work.
of compensation) with entities as descr	ibed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by se present during the 36 months prior to publication.
Section 4. Intellectual Prope	rty Patents & Copyric	yhts
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No

Romanelli 2



Section 5. Relationships not sovered above
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Dr. Romanelli has nothing to disclose.

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Yang 1



Section 1. Identifying Inform	mation	
1. Given Name (First Name) Jason	2. Surname (Last Name) Yang	3. Date 05-January-2021
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Jay Shah
5. Manuscript Title Esophagopharyngeal Perforation and	Prevertebral Abscess after A	Anterior Cervical Discectomy and Fusion: A Case Report
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Rao 1



Section 1.	Identifying Inform	ation		
1. Given Name (First Naina	t Name)	2. Surname (Last Name) Rao		3. Date 19-April-2021
4. Are you the corre	sponding author?	Yes ✓ No	Corresponding Author's Name Jay K. Shah	
5. Manuscript Title Esophagopharyng	geal Perforation and P	revertebral Abscess after	Anterior Cervical Discectom	y and Fusion: A Case Report
6. Manuscript Identi	ifying Number (if you kn	ow it)		
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Rao 2



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Gerling 1



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