

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### 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.

#### 1. 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".

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

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#### 4. Intellectual Property.

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

#### 5. Relationships not covered above.

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

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Fedan

2. Surname (Last Name)

Avrumova

3. Date

03-December-2020

4. Are you the corresponding author?

Yes  No

5. Manuscript Title

Evaluation of K-wireless Robotic and Navigation Assisted Pedicle Screw Placement in Adult Degenerative Spinal Surgery: Learning Curve and Technical Notes

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest?  Yes  No

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Are there any relevant conflicts of interest?  Yes  No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

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Dr. Avrumova has nothing to disclose.

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1. Given Name (First Name) Kyle	2. Surname (Last Name) Morse	3. Date 03-December-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Fedan Avrumova
5. Manuscript Title Evaluation of K-wireless Robotic and Navigation Assisted Pedicle Screw Placement in Adult Degenerative Spinal Surgery: Learning Curve and Technical Notes		
6. Manuscript Identifying Number (if you know it)		

### Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?  Yes  No

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Are there any relevant conflicts of interest?  Yes  No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

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Dr. Morse has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name)

Madison

2. Surname (Last Name)

Heath

3. Date

03-December-2020

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Fedan Avrumova

5. Manuscript Title

Evaluation of K-wireless Robotic and Navigation Assisted Pedicle Screw Placement in Adult Degenerative Spinal Surgery: Learning Curve and Technical Notes

6. Manuscript Identifying Number (if you know it)

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Yes

No



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Dr. Heath has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Roger

2. Surname (Last Name) Widmann

3. Date 03-December-2020

4. Are you the corresponding author?  Yes  No Corresponding Author's Name Fedan Avrumova

5. Manuscript Title Evaluation of K-wireless Robotic and Navigation Assisted Pedicle Screw Placement in Adult Degenerative Spinal Surgery: Learning Curve and Technical Notes

6. Manuscript Identifying Number (if you know it) \_\_\_\_\_

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Are there any relevant conflicts of interest?  Yes  No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Medtronic	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fee for Service Consultant Spine

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

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Fee for Service Consultant to OrthoPediatic Company Spine Division; Editorial Board of Spine Deformity Journal; Editorial Board of The Journal of Children's Orthopaedics; Consultant Reviewer of Journal of Pediatric Orthopaedics

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Dr. Widmann reports personal fees from Medtronic, outside the submitted work; and Fee for Service Consultant to OrthoPediatic Company Spine Division; Editorial Board of Spine Deformity Journal; Editorial Board of The Journal of Children's Orthopaedics; Consultant Reviewer of Journal of Pediatric Orthopaedics .

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name) Darren	2. Surname (Last Name) Lebl	3. Date 03-December-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Fedan Avrumova
5. Manuscript Title Evaluation of K-wireless Robotic and Navigation Assisted Pedicle Screw Placement in Adult Degenerative Spinal Surgery: Learning Curve and Technical Notes		
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Are there any relevant conflicts of interest?  Yes  No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Medtronic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Research Support

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

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Are there any relevant conflicts of interest?  Yes  No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
K2M- Stryker	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Royalties
NuVasive,	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Royalties
Woven Orthopedic Technologies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Ownership Interest

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Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Vestia Ventures MiRus Investment LLC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Ownership Interest
ISPH II, LLC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Investment Interest

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

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Dr. Lebl reports other from Medtronic, during the conduct of the study; other from K2M- Stryker, other from NuVasive,, other from Woven Orthopedic Technologies, other from Vestia Ventures MiRus Investment LLC, other from ISPH II, LLC, outside the submitted work; .

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