

ICMJE DISCLOSURE FORM

Date: 05.04.2021

Your Name: J. Frederick Hernekamp

Manuscript Title: Soft Tissue Reconstruction Of Posterior Midline Defects After Spinal Surgery

Manuscript number (if known): JSS-20-688-R1

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2	Grants or contracts from any entity (if not indicated in item #1 above).	None
3	Royalties or licenses	None
4	Consulting fees	None

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None
6	Payment for expert testimony	None
7	Support for attending meetings and/or travel	None
8	Patents planned, issued or pending	None
9	Participation on a Data Safety Monitoring Board or Advisory Board	None
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13	Other financial or non-financial interests	None

Please summarize the above conflict of interest in the following box:

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Please place an "X" next to the following statement to indicate your agreement:

I certify that I have answered every question and have not altered the wording of any of the questions on this form.



## ICMJE DISCLOSURE FORM

Date: 05.04.2021  
 Your Name: Nico Leibig  
 Manuscript Title: Soft Tissue Reconstruction Of Posterior Midline Defects After Spinal Surgery  
 Manuscript number (if known): JSS-20-688-R1

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**Dr. Nico Leibig  
Fecharzt**

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## ICMJE DISCLOSURE FORM

Date: 05.04.2021  
 Your Name: Tomke Cordts  
 Manuscript Title: Soft Tissue Reconstruction Of Posterior Midline Defects After Spinal Surgery  
 Manuscript number (if known): JSS-20-688-R1

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**Dr. Tomke Cordts**  
 Oberarzt  
 Facharzt für Plastische und Ästhetische Chirurgie  
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6.4.2021

## ICMJE DISCLOSURE FORM

Date: 19.04.2021

Your Name: Tomke Cordts

Manuscript Title: Revisionary Soft Tissue Reconstruction Of Posterior Midline Defects After Spinal Surgery – Plastic Reconstructive Options Including Perforator Flaps

Manuscript number (if known): JSS-20-688-RI

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*Facharzt für Plastische und Ästhetische Chirurgie*  
*Klinik für Hand-, Plastische und Rekonstruktive Chirurgie, Mikrochirurgie*  
*- Schwererandversetztenzentrum -*  
*Ludwig-Guttmann-Str. 13*  
*67071 Ludwigshafen*

2021/04/23

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### ICMJE DISCLOSURE FORM

Date: 22.04.2021

Your Name: Frederick Hernekamp

Manuscript Title: Revisionary Soft Tissue Reconstruction Of Posterior Midline Defects After Spinal Surgery – Plastic Reconstructive Options Including Perforator Flaps

Manuscript number (if known): JSS-20-688-R1

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Date: 19.04.2021

Your Name: Ulrich Kneser

Manuscript Title: Revisionary Soft Tissue Reconstruction Of Posterior Midline Defects After Spinal Surgery – Plastic Reconstructive Options Including Perforator Flaps

Manuscript number (if known): JSS-20-688-R1

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## ICMJJE DISCLOSURE FORM

Date: 23.04.2021

Your Name: Thomas Kremer

Manuscript Title: Revisionary Soft Tissue Reconstruction Of Posterior Midline Defects After Spinal Surgery – Plastic Reconstructive Options Including Perforator Flaps

Manuscript number (if known): JSS-20-688-R1

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Prof. Dr. med. Thomas Kremer  
 Chefarzt  
 Klinik für Plastische und Handchirurgie n.  
 Schwerbrandverletzentrum  
 Klinikum St. Georg gGmbH  
 Delitzscher Straße 141, 04129 Leipzig  
 Tel.: 0341 909-2555 | Fax: 0341 909-2291



## ICMJE DISCLOSURE FORM

Date: 22.04.2021

Your Name: Nico Leibig

Manuscript Title: Revisionary Soft Tissue Reconstruction Of Posterior Midline Defects After Spinal Surger – Plastic Reconstructive Options Including Perforator Flaps

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11	Stock or stock options	___ None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	___ None	
13	Other financial or non-financial interests	___ None	

**Please summarize the above conflict of interest in the following box:**

The authors have no conflicts of interest to disclose concerning the present manuscript entitled “**Soft Tissue Reconstruction Of Posterior Midline Defects After Spinal Surgery**” submitted to the **Journal of Spine Surgery (JSS-20-688-R1)**.

**Please place an “X” next to the following statement to indicate your agreement:**

  X   I certify that I have answered every question and have not altered the wording of any of the questions on this form.

