Date: Mar. 05, 2023

Your Name: Morad Chughtai

Manuscript Title: Perioperative Outcomes of Cervical Disc Arthroplasty: No difference Between

Orthopaedic and Neurologic Surgeons Manuscript number (if known): JSS-21-66

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

	Ti	Name all entities with whom you have this relationship or indicate none (add rows as needed) me frame: Since the initia	Specifications/Comments (e.g., if payments were made to you or to your institution) I planning of the work
_	All a constant for all a	V. N.	
1	All support for the	X_None	
	present manuscript (e.g.,		
	funding, provision of		
	study materials, medical		
	writing, article processing		
	charges, etc.)		
	No time limit for this		
	item.		
		Time frame: past	36 months
2	Grants or contracts from	XNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	XNone	

4	Consulting fees	XNone	
5	Payment or honoraria for	X_None	
	lectures, presentations,		
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert testimony	XNone	
7	Support for attending	XNone	
	meetings and/or travel		
	B	V. N.	
8	Patents planned, issued	X_None	
	or pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board		
	or Advisory Board		
10	Leadership or fiduciary role in other board, society, committee or	X None	
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	advocacy group, paid or		
	unpaid		
11	Stock or stock options	XNone	
	Stock of Stock options		
10	Descipt of a suitors and	V Nana	
12	Receipt of equipment, materials, drugs, medical	X_None	
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
Plea	se summarize the above	conflict of interest in the following box:	
		commercial interest in the following box	
No	one.		
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Plea	se place an "X" next to t	he following statement to indicate your agreement:	

Date: Mar. 05, 2023

Your Name: Prashant Rajan

Manuscript Title: Perioperative Outcomes of Cervical Disc Arthroplasty: No difference Between

Orthopaedic and Neurologic Surgeons Manuscript number (if known): JSS-21-66

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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	X_None	
3	Royalties or licenses	X_None	

4	Consulting fees	XNone	
5	Payment or honoraria for	X_None	
	lectures, presentations,		
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert testimony	XNone	
7	Support for attending	XNone	
	meetings and/or travel		
	B	V. N.	
8	Patents planned, issued	X_None	
	or pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board		
	or Advisory Board		
10	Leadership or fiduciary role in other board, society, committee or	X None	
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	advocacy group, paid or		
	unpaid		
11	Stock or stock options	XNone	
	Stock of Stock options		
10	Descipt of a suitors and	V Nana	
12	Receipt of equipment, materials, drugs, medical	X_None	
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
Plea	se summarize the above	conflict of interest in the following box:	
		commercial interest in the following box	
No	one.		
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Plea	se place an "X" next to t	he following statement to indicate your agreement:	

Date: Mar. 05, 2023

Your Name: Ahmed K. Emara

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	charges, etc.)		
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	item.		
		Time frame: past	36 months
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	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	X_None	

4	Consulting fees	XNone	
5	Payment or honoraria for	X_None	
	lectures, presentations,		
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert testimony	XNone	
7	Support for attending	XNone	
	meetings and/or travel		
	B	V. N.	
8	Patents planned, issued	X_None	
	or pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board		
	or Advisory Board		
10	Leadership or fiduciary role in other board, society, committee or	X None	
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	advocacy group, paid or		
	unpaid		
11	Stock or stock options	XNone	
	Stock of Stock options		
10	Descipt of a suitors and	V Nana	
12	Receipt of equipment, materials, drugs, medical	X_None	
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
Plea	se summarize the above	conflict of interest in the following box:	
		commercial interest in the following box	
Nc	one.		
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Plea	se place an "X" next to t	he following statement to indicate your agreement:	

Date: Mar. 05, 2023 Your Name: Daniel Grits

Manuscript Title: Perioperative Outcomes of Cervical Disc Arthroplasty: No difference Between

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	item.		
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2	Grants or contracts from	XNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	XNone	

4	Consulting fees	XNone	
5	Payment or honoraria for	X_None	
	lectures, presentations,		
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert testimony	XNone	
7	Support for attending	XNone	
	meetings and/or travel		
	B	V. N.	
8	Patents planned, issued	X_None	
	or pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board		
	or Advisory Board		
10	Leadership or fiduciary role in other board, society, committee or	X None	
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	advocacy group, paid or		
	unpaid		
11	Stock or stock options	XNone	
	Stock of Stock options		
10	Descipt of a suitors and	V Nana	
12	Receipt of equipment, materials, drugs, medical	X_None	
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
Plea	se summarize the above	conflict of interest in the following box:	
		commercial interest in the following box	
No	one.		
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Plea	se place an "X" next to t	he following statement to indicate your agreement:	

Date: Mar. 05, 2023 Your Name: Mitchell Ng

Manuscript Title: Perioperative Outcomes of Cervical Disc Arthroplasty: No difference Between

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to you or to your

4	Consulting fees	XNone	
5	Payment or honoraria for	X_None	
	lectures, presentations,		
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert testimony	XNone	
7	Support for attending	XNone	
	meetings and/or travel		
	B	V. N.	
8	Patents planned, issued	X_None	
	or pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board		
	or Advisory Board		
10	Leadership or fiduciary role in other board, society, committee or	X None	
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	advocacy group, paid or		
	unpaid		
11	Stock or stock options	XNone	
	Stock of Stock options		
10	Descipt of a suitors and	V Nana	
12	Receipt of equipment, materials, drugs, medical	X_None	
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
Plea	se summarize the above	conflict of interest in the following box:	
		commercial interest in the following box	
Nc	one.		
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Plea	se place an "X" next to t	he following statement to indicate your agreement:	

Date: Mar. 05, 2023 Your Name: Wasif Talpur

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_	All a constant for all a	V. N.	
1	All support for the	X_None	
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	study materials, medical		
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	charges, etc.)		
	No time limit for this		
	item.		
		Time frame: past	36 months
2	Grants or contracts from	XNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	XNone	

4	Consulting fees	XNone	
5	Payment or honoraria for	X_None	
	lectures, presentations,		
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert testimony	XNone	
7	Support for attending	XNone	
	meetings and/or travel		
	B	V. N.	
8	Patents planned, issued	X_None	
	or pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board		
	or Advisory Board		
10	Leadership or fiduciary role in other board, society, committee or	X None	
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	advocacy group, paid or		
	unpaid		
11	Stock or stock options	XNone	
	Stock of Stock options		
10	Descipt of a suitors and	V Nana	
12	Receipt of equipment, materials, drugs, medical	X_None	
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
Plea	se summarize the above	conflict of interest in the following box:	
		commet of interest in the following box	
No	one.		
'			
Plea	se place an "X" next to t	he following statement to indicate your agreement:	

Date: Mar. 05, 2023

Your Name: Dominic W. Pelle

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	study materials, medical		
	writing, article processing		
	charges, etc.)		
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	item.		
		Time frame: past	36 months
2	Grants or contracts from	XNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	XNone	

4	Consulting fees	Stryker	Paid consultant	
5	Payment or honoraria for	X None		
	lectures, presentations,			
	speakers bureaus,			
	manuscript writing or			
	educational events			
6	Payment for expert	X_None		
	testimony			
_		V N		
7	Support for attending meetings and/or travel	XNone		
8	Patents planned, issued	XNone		
	or pending			
9	Participation on a Data	XNone		
	Safety Monitoring Board			
	or Advisory Board			
10	Leadership or fiduciary	X_None		
	role in other board, society, committee or			
	advocacy group, paid or unpaid			
11	Stock or stock options	X None		
	Clock of Clock options			
12	Receipt of equipment,	X_None		
	materials, drugs, medical			
	writing, gifts or other			
	services			
13	Other financial or non-	X_None		
	financial interests			
Dloo	co cummariza tha abaya	conflict of interest in t	he following boy:	
ried	Please summarize the above conflict of interest in the following box:			

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Date: Mar. 05, 2023

Your Name: Jason W. Savage

Manuscript Title: Perioperative Outcomes of Cervical Disc Arthroplasty: No difference Between

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1	All support for the	X_None	
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	item.		
		Time frame: past	36 months
2	Grants or contracts from	XNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	XNone	

4	Consulting fees	Stryker	Paid consultant
	_	Wright Medical	Paid consultant
		Technology, Inc.	
5	Payment or honoraria for	X_None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events	V N	
6	Payment for expert	X_None	
	testimony		
7	Company for attackling	V None	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued	XNone	
	or pending		
9	Participation on a Data	X_None	
	Safety Monitoring Board		
	or Advisory Board		
10	Leadership or fiduciary role in other board,	Journal of Spinal	Editorial or governing board
		Disorders and Techniques	
	society, committee or		
	advocacy group, paid or unpaid		
11	Stock or stock options	XNone	
	·		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non- financial interests	X_None	

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Date: Mar. 05, 2023

Your Name: Thomas Mroz

Manuscript Title: Perioperative Outcomes of Cervical Disc Arthroplasty: No difference Between

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	item.			
		Time frame: past	36 months	
2	Grants or contracts from	X_None		
	any entity (if not indicated			
	in item #1 above).			
3	Royalties or licenses	Stryker	IP royalties	

4	Consulting fees	XNone	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	X_None	
6	Payment for expert testimony	XNone	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	X_None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	X_None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	The Spine Journal Global Spine Journal North American Spine Society	Editorial or governing board Editorial or governing board Board or committee member
11	Stock or stock options	Pearl Diver, Inc.	Stock or stock Options
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non- financial interests	XNone	

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