

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Dong

2. Surname (Last Name)
Chen

3. Date
25-July-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Ai-Min Wu

5. Manuscript Title

The Feasibility of cortical bone trajectory screw fixation for lower thoracic spine.

6. Manuscript Identifying Number (if you know it)

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Dr. Chen 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) Wen-Fei	2. Surname (Last Name) Ni	3. Date 25-July-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Ai-Min Wu
5. Manuscript Title The Feasibility of cortical bone trajectory screw fixation for lower thoracic spine.		
6. Manuscript Identifying Number (if you know it)		

Section 2. The Work Under Consideration for Publication

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Dr. Ni has nothing to disclose.

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1. Given Name (First Name)

Yan

2. Surname (Last Name)

Lin

3. Date

25-July-2017

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Ai-Min Wu

5. Manuscript Title

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1. Given Name (First Name) Xiang-Yang	2. Surname (Last Name) Wang	3. Date 25-July-2017
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