

#### **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.

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

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

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Other: Anything not covered under the previous three boxes

**Pending:** The patent has been filed but not issued

**Issued:** The patent has been issued by the agency

**Licensed:** The patent has been licensed to an entity, whether earning royalties or not

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

Badura 1



Section 1. Identifying Inform				
Identifying Information	ation			
Given Name (First Name)  Jeffrey	2. Surname (Last Name Badura	)		3. Date 22-June-2015
4. Are you the corresponding author?	Yes ✓ No	Correspondir Hyun Bae	ng Author	's Name
5. Manuscript Title Transient local bone remodelling effects	s of rhBMP-2 in Ovine in	nterbody spine fu	usion mo	del
6. Manuscript Identifying Number (if you kno	ow it)			
Section 2. The Work Under Co	onsideration for Pub	olication		
Did you or your institution <b>at any time</b> received any aspect of the submitted work (including statistical analysis, etc.)?  Are there any relevant conflicts of interest of the submitted work (including statistical analysis, etc.)?	but not limited to grants	, data monitoring b	ooard, stud	dy design, manuscript preparation,
Excess rows can be removed by pressing	-	iave more triair o	nie entity	piess the ADD button to add a fow.
Name of Institution/Company	Grant? Personal Fees?	Non-Financial Support?	Other?	Comments
Medtronic, Inc.			V	itudy Sponsor, Employee of Medtronic, Inc.
Section 3. Relevant financial a	activities outside th	e submitted w	ork.	
Place a check in the appropriate boxes in of compensation) with entities as described clicking the "Add +" box. You should rep	bed in the instructions.	. Use one line for	each ent	ity; add as many lines as you need by
Are there any relevant conflicts of interes	st? ✓ Yes No	0		
If yes, please fill out the appropriate info	rmation below.			
Name of Entity	Grant? Personal Fees?	Non-Financial Support?	Other?	Comments
Medtronic, Inc.				itudy Sponsor, Employee of Medtronic, Inc.

Badura 2



Section 4. Intellectual Property Patents & Copyrights
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo
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Section 6. Disclosure Statement
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Mr. Badura reports personal fees and other from Medtronic, Inc., during the conduct of the study; personal fees and other from Medtronic, Inc., outside the submitted work; .

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Badura 3



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Bae 1



Section 1. Identifying Info	rmation			
1. Given Name (First Name) Hyun	2. Surname (Last Name) Bae	3. Date 20-January-2016		
4. Are you the corresponding author?	✓ Yes No			
5. Manuscript Title Transient local bone remodelling effe	ects of rhBMP-2 in Ovine interbody spine fusion mode	l		
6. Manuscript Identifying Number (if you	know it)			
Section 2. The Work Under	Consideration for Publication			
Did you or your institution <b>at any time</b> 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 into	erest? Yes V No			
Section 3. Relevant financia	al activities outside the submitted work.			
of compensation) with entities as des	es in the table to indicate whether you have financial r cribed in the instructions. Use one line for each entity report relationships that were <b>present during the 36</b>	; add as many lines as you need by		
Are there any relevant conflicts of into	erest? Yes V No			
Section 4. Intellectual Prop	erty Patents & Copyrights			
Do you have any patents, whether pla	anned, pending or issued, broadly relevant to the wor	k? ☐ Yes 🗸 No		

Bae 2



Section 5.	
Dection 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
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	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements rnals may ask authors to disclose further information about reported relationships.
Section 6.	Disclosure Statement
Based on the abo	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Bae has noth	ing to disclose.

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1

administrative support, etc. Pradhan, MD MSE



Section 1.	Identifying Inform	nation		
1. Given Name (Fi Ben Bhupendra	rst Name)	2. Surname (Last Name) Pradhan, MD MSE	3. D 09-F	Pate February-2016
4. Are you the cor	responding author?	Yes 🗸 No	Corresponding Author's Name Hyun Bae	
5. Manuscript Title Transient Local E		ts of rhBMP-2 in the Ovine	Interbody Spine Fusion Model	
6. Manuscript Ide	ntifying Number (if you kr	now it)		
			_	
Section 2.	The Work Under C	onsideration for Public	cation	
any aspect of the s statistical analysis,	ubmitted work (including	g but not limited to grants, da	a third party (government, commer ta monitoring board, study design,	
Section 3.	Relevant financial	activities outside the	submitted work.	
of compensation clicking the "Add	n) with entities as descr	ibed in the instructions. Us port relationships that we	ether you have financial relation se one line for each entity; add as re <b>present during the 36 month</b>	s many lines as you need by
Section 4.	Intellectual Prope	rty Patents & Copyri	ghts	
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work?	Yes 🗸 No

Pradhan, MD MSE



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Dr. Pradhan, MD MSE has nothing to disclose.

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Pradhan, MD MSE



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Patel 1



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Vikas	2. Surname (Last Name) Patel		3. Date 29-June-2015
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Auth	or's Name
5. Manuscript Title Transient Local Bone Remodeling Effec	cts of rhBMP-2 in the Ovine	Interbody Spine Fus	ion Model.
6. Manuscript Identifying Number (if you k	now it)		
Section 2. The Work Under C	Consideration for Public	cation	
any aspect of the submitted work (includin statistical analysis, etc.)? Are there any relevant conflicts of inter	g but not limited to grants, da rest?  Yes  No ormation below. If you have	ita monitoring board, s	ent, commercial, private foundation, etc.) fo tudy design, manuscript preparation, etc.) it with the second section is a second to a second sec
Name of Institution/Company	Grant'	n-Financial other	Comments
Medtronic			Consulting fees for surgical work on the sheep. Less than \$10K.
Section 3. Relevant financial	activities outside the s	submitted work.	
	ribed in the instructions. Us	se one line for each e	cial relationships (regardless of amount ntity; add as many lines as you need by e 36 months prior to publication.
Are there any relevant conflicts of interior of the lifyes, please fill out the appropriate inf			
ii yes, picase iiii out the appropriate iiii	omation below.		
Name of Entity	Grant	n-Financial upport?	Comments
Medtronic	<b>V</b>		Research grants for other research projects outside the scope of this manuscript.

Patel 2



Soutien A
Section 4. Intellectual Property Patents & Copyrights
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes V
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Dr. Patel reports personal fees from Medtronic, during the conduct of the study; grants from Medtronic, outside the submitted work; .

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Patel 3



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Sardar 1



Section 1. Identifying Inform	mation	
1. Given Name (First Name) Zeeshan	2. Surname (Last Name) Sardar	3. Date 07-June-2016
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Hyun Bae
5. Manuscript Title Transient local bone remodelling effe	cts of rhBMP-2 in Ovine inte	erbody spine fusion model
6. Manuscript Identifying Number (if you l	know it)	
Section 2. The Work Under 0	Consideration for Public	cation
	ng but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for at a monitoring board, study design, manuscript preparation,
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Do you have any patents, whether pla	nned, pending or issued, br	roadly relevant to the work? Yes V No

Sardar 2



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Dr. Sardar has nothing to disclose.

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# 4. Intellectual Property.

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

# Relationships not covered above.

Use this section to report other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work.

#### Definitions.

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Other: Anything not covered under the previous three boxes

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

Seim 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fii Howard	rst Name)	2. Surname (Last Name) Seim	3. Date 29-June-2015	
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Hyun Bae	
5. Manuscript Title Transient Local B		ts of rhBMP-2 in the Ovine	Interbody Spine Fusion Model.	
6. Manuscript Ider	ntifying Number (if you kr	now it)		
			_	
Section 2.	The Work Under Co	onsideration for Publi	cation	
any aspect of the s statistical analysis,	ubmitted work (including	but not limited to grants, da	a third party (government, commercial, private foundate monitoring board, study design, manuscript prepara	
	l			
Section 3.	Relevant financial	activities outside the	submitted work.	
of compensation clicking the "Add	) with entities as descri	bed in the instructions. Use port relationships that we	ether you have financial relationships (regardless se one line for each entity; add as many lines as yo re <b>present during the 36 months prior to publi</b> c	ou need by
	l			
Section 4.	Intellectual Proper	ty Patents & Copyri	yhts	
Do you have any	patents, whether plan	ned, pending or issued, b	oadly relevant to the work? Yes V No	

Seim 2



Section 5. Relationships not solvered above
Relationships not covered above
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?
Yes, the following relationships/conditions/circumstances are present (explain below):
✓ No other relationships/conditions/circumstances that present a potential conflict of interest
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statement On occasion, journals may ask authors to disclose further information about reported relationships.
Section 6. Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Seim has nothing to disclose.

### **Evaluation and Feedback**

Please visit <a href="http://www.icmje.org/cgi-bin/feedback">http://www.icmje.org/cgi-bin/feedback</a> to provide feedback on your experience with completing this form.

Seim 3



#### **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.

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".

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



Section 1. Identifying Inform	nation			
Given Name (First Name)  Jeffrey	2. Surname (Last Name) Toth		3. Date 14-May-2015	
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Hyun Bae		
5. Manuscript Title Transient Local Bone Remodeling Effec	ts of rhBMP-2 in the Ovine	e Interbody Spine Fus	ion Model.	
6. Manuscript Identifying Number (if you k	now it)			
Section 2. The Work Under C	onsideration for Publi	cation		
Did you or your institution <b>at any time</b> rece any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of inter	g but not limited to grants, d		ent, commercial, private foundation, etc.) for tudy design, manuscript preparation,	
		ve more than one ent	ity press the "ADD" button to add a row.	
Excess rows can be removed by pressin		-· · · ·		
Name of Institution/Company	Grant	on-Financial Other	Comments	
Medtronic			My employer, The Medical College of Wisconsin, Inc. received institutional support from Medtronic to conduct some of the analyses described in the manuscript.	
Section 3. Relevant financial	activities outside the	submitted work.		
Place a check in the appropriate boxes	in the table to indicate wh	nether you have finan	cial relationships (regardless of amount	
of compensation) with entities as descr	ibed in the instructions. U	se one line for each e	ntity; add as many lines as you need by	
clicking the "Add +" box. You should re Are there any relevant conflicts of inter-	•	re present auring th	e 30 months prior to publication.	
If yes, please fill out the appropriate inf				



Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments		
Medtronic		<b>✓</b>			I served as a scientific consultant to Medtronic. Although I did not receive any fees related to the submitted manuscript.		
Medtronic	✓				My employer, The Medical College of Wisconsin, Inc. received institutional support from Medtronic to conduct other research studies which were not the subject of the submitted manuscript.		
Cytophil/ CaP Biomaterials	<b>✓</b>				My employer, The Medical College of Wisconsin, Inc. received institutional support to conduct research studies which were not the subject of the submitted manuscript.		
Titan Spine, LLC	<b>✓</b>				My employer, The Medical College of Wisconsin, Inc. received institutional support to conduct research studies which were not the subject of the submitted manuscript.		
Section 4. Intellectual Property Patents & Copyrights  Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No  Section 5. Relationships not covered above							
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?							
Yes, the following relationships/conditions/circumstances are present (explain below):  No other relationships/conditions/circumstances that present a potential conflict of interest							
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.							

# Section 6. Disclosure Statement

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Dr. Toth reports grants from Medtronic, during the conduct of the study; personal fees from Medtronic, grants from Medtronic, grants from Cytophil/ CaP Biomaterials, grants from Titan Spine, LLC, outside the submitted work; .

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Turner 1



Section 1.	Identifying Inform	nation					
1. Given Name (Fil A. Simon	rst Name)	2. Surname (Last Name) Turner		3. Date 29-June-2015			
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Nan	ne			
5. Manuscript Title Transient Local B		ts of rhBMP-2 in the Ovine	Interbody Spine Fusion Mo	del			
6. Manuscript Ider	ntifying Number (if you kr	now it)					
			_				
Section 2. The Work Under Consideration for Publication							
any aspect of the s statistical analysis,	ubmitted work (including	but not limited to grants, da	a third party (government, cor ata monitoring board, study des	nmercial, private foundation, etc.) for sign, manuscript preparation,			
Section 3.	Relevant financial	activities outside the	submitted work.				
Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were <b>present during the 36 months prior to publication</b> .  Are there any relevant conflicts of interest? Yes Vo							
Section 4.	Intellectual Proper	rty Patents & Copyri	ghts				
Do you have any	patents, whether plan	ned, pending or issued, bı	roadly relevant to the work?	Yes 🗸 No			

Turner 2



Section 5. Relationships not covered above					
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below.					
Dr. Turner has nothing to disclose.					

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