

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.

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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.

Relationships not covered above.

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

Nojiri 1



Section 1. Identifying	g Information			
1. Given Name (First Name) Kenya	2. Surname (Last Name) Nojiri	3. Date 06-October-2017		
4. Are you the corresponding au	thor? Yes Vo	Corresponding Author's Name Kota Watanabe		
5. Manuscript Title A 20-year prospective longitu sectional study	dinal study on degeneration of the c	ervical spine using MRI in volunteers: follow-up of a cross		
6. Manuscript Identifying Number	er (if you know it)			
Section 2. The Work	Under Consideration for Public	ation		
Did you or your institution at any time 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 interest? Yes Vo				
Section 3. Relevant f	inancial activities outside the s	ubmitted work.		
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Are there any relevant conflicts of interest? Yes V No				
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Do you have any patents, who	ether planned, pending or issued, bro	oadly relevant to the work? Yes V No		

Nojiri 2



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NISHIWAKI 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi YUJI	rst Name)	2. Surname (Last Name) NISHIWAKI	3. Date 07-October-2017
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Kota Watanabe
5. Manuscript Title A 20-year prospe sectional study		dy on degeneration of the	cervical spine using MRI in volunteers: follow-up of a cross
6. Manuscript Ide	ntifying Number (if you kr	now it)	
			-
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NISHIWAKI 2



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Dr. NISHIWAKI has nothing to disclose.			

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patent



Section 1. Identifying In	formation	
1. Given Name (First Name) Masahiko	2. Surname (Last Name) Watanabe	3. Date 06-October-2017
4. Are you the corresponding author?	Yes 🗸 No	Corresponding Author's Name Kota Watanabe
5. Manuscript Title A 20-year prospective longitudina sectional study	I study on degeneration of the o	cervical spine using MRI in volunteers: follow-up of a cross
6. Manuscript Identifying Number (if	ou know it)	
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Tsuji 1



Section 1. Identifying Inform	nation		
identifying inform	lation		
1. Given Name (First Name) Takashi	2. Surname (Last Name) Tsuji		3. Date 05-October-2017
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Autho	or's Name
5. Manuscript Title A 20-year prospective longitudinal stud sectional study	y on degeneration of the	cervical spine using M	IRI in volunteers: follow-up of a cross
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Are there any relevant conflicts of intere	est? Yes ✓ No		
•			
Section 3. Relevant financial			
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Are there any relevant conflicts of intere	·	re present during the	e 30 months prior to publication.
If yes, please fill out the appropriate info			
7			
Name of Entity	Grant? Personal No	n-Financial Other?	Comments
Lecture's fee			Showa Yakuhin Kako Co. Ltd., Janssen Pharma KK, Pfizer Japan, Eli Lilly Japan, Shionogi Pharma, Medtronic
			Inc,
Section 4. Intellectual Proper	ty Patents & Copyri	ahts	
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo			

Tsuji 2



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Section 6			
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Fujiwara 2



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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

Ishihama 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi Hiroko	rst Name)	2. Surname (Last Name) Ishihama	3. Date 07-October-2017
4. Are you the cor	responding author?	☐ Yes ✓ No	Corresponding Author's Name Kota Watanabe
 5. Manuscript Title A 20-year prospective longitudinal study on degeneration of the cervical spine using MRI in volunteers: follow-up of a cross sectional study 6. Manuscript Identifying Number (if you know it) 			
Section 2.	The Work Under Co	onsideration for Public	cation
Did you or your institution at any time 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 interest? Yes No			
Section 3.	Relevant financial	activities outside the s	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 present during the 36 months prior to publication . Are there any relevant conflicts of interest? Yes Vo			
Section 4.	Intellectual Proper	ty Patents & Copyri	ghts
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No

Ishihama 2



Section 5. Relationships not so			
Relationships not cov	ered 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			
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Section 6. Disclosure Statement			
Based on the above disclosures, this form we below.	ill automatically generate a disclosure statement, which will appear in the box		
Dr. Ishihama has nothing to disclose.			

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.

Ishihama 3



Instructions

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

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Fujita 1



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Nobuyuki	2. Surname (Last Name) Fujita		3. Date 09-October-2017
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author	or's Name
 Manuscript Title A 20-year prospective longitudinal stud sectional study 	y on degeneration of the	cervical spine using N	лRI in volunteers: follow-up of a cross
6. Manuscript Identifying Number (if you kr	now it)		
Section 2. The Work Under Co	onsideration for Public	cation	
Did you or your institution at any time rece any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, da		ent, commercial, private foundation, etc.) for udy design, manuscript preparation,
•	ormation below. If you hav	e more than one ent	ity press the "ADD" button to add a row.
Name of Institution/Company	Grant? Personal Noi	n-Financial other?	Comments
The General Insurance Association of Japan	✓		Joint Collaborative Research
Section 3. Relevant financial	activities outside the s	submitted work.	
Place a check in the appropriate boxes i of compensation) with entities as descri clicking the "Add +" box. You should rep Are there any relevant conflicts of intere	in the table to indicate wh ibed in the instructions. Us port relationships that wer	ether you have financ se one line for each ei	ntity; add as many lines as you need by
Section 4. Intellectual Proper	rty Patents & Copyric	ghts	
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the	work? ☐ Yes ✓ No

Fujita 2



Section 5.	Delethorship and account above
	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of ncing, what you wrote in the submitted work?
Yes, the follow	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
	nuscript 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. Fujita reports	grants from The General Insurance Association of Japan, during the conduct of the study; .

Evaluation and Feedback

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Fujita 3



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Katoh 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi Hiroyuki	rst Name)	2. Surname (Last Name) Katoh	3. Date 09-October-2017
4. Are you the cor	responding author?	☐ Yes ✓ No	Corresponding Author's Name Kota Watanabe
5. Manuscript Title A 20-year prospe sectional study		ly on degeneration of the	cervical spine using MRI in volunteers: follow-up of a cross
6. Manuscript Ider	ntifying Number (if you kr	now it)	
Section 2.	The Work Under Co	onsideration for Public	cation
any aspect of the s statistical analysis,	ubmitted work (including	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Section 3.	Relevant financial	activities outside the s	submitted work.
of compensation clicking the "Add	n) with entities as descri	bed in the instructions. Use port relationships that we	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication.
Section 4.	Intellectual Proper	rty Patents & Copyric	ghts
Do you have any			roadly relevant to the work? Yes V No

Katoh 2



Section 5. Relationships not covered above
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Section 6. Disclosure Statement
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Dr. Katoh has nothing to disclose.

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Shimizu 1



Section 1. Identifying Inform	ation	
Given Name (First Name) Kentaro	2. Surname (Last Name) Shimizu	3. Date 23-October-2017
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Kota Watanabe
5. Manuscript Title A 20-year prospective longitudinal stud sectional study	y on degeneration of the o	cervical spine using MRI in volunteers: follow-up of a cross
6. Manuscript Identifying Number (if you kn	now it)	
Section 2. The Work Under Co	onsideration for Public	ation
	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,
Section 3. Relevant financial	activities outside the s	ubmitted work.
Place a check in the appropriate boxes i of compensation) with entities as descri	n the table to indicate who bed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amount e one line for each entity; add as many lines as you need by e present during the 36 months prior to publication .
Section 4. Intellectual Proper	ty Patents & Copyrig	ilate
Do you have any patents, whether plani	nea, penaing or issued, br	oadly relevant to the work? Yes ✓ No

Shimizu 2



Section 5. Polationships not severed 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):
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Section 6. Disclosure Statement
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Okada 1



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Eijiro	2. Surname (Last Name) Okada		3. Date 07-October-2017
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author	or's Name
 Manuscript Title A 20-year prospective longitudinal stuc sectional study 		cervical spine using N	MRI in volunteers: follow-up of a cross
Manuscript Identifying Number (if you kr	now it)		
Section 2. The Work Under Co	onsideration for Publi	cation	
Did you or your institution at any time rece any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, da		ent, commercial, private foundation, etc.) for udy design, manuscript preparation,
•	ormation below. If you hav	e more than one ent	ity press the "ADD" button to add a row.
Name of Institution/Company	Grant? Personal No	n-Financial Other?	Comments
The general insurance association of Japan	✓		Joint Collaborative Research
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Section 4. Intellectual Proper	rty Patents & Copyri	ghts	
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the	work? ☐ Yes ✓ No

Okada 2



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Disclosure Statement
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Dr. Okada reports grants from The general insurance association of Japan, during the conduct of the study; .

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Okada 3



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Daimon 1



Section 1.	Identifying Inform	ation					
1. Given Name (Firs Kenshi			e (Last Name)			3. Date 23-October-2017	
4. Are you the corre	sponding author?	Yes	✓ No	Correspon Kota Wata	ding Author's anabe	Name	
sectional study			eration of the	e cervical spir	ne using MRI	in volunteers: follow-up of a cross	
6. Manuscript Ident JBJS-D-17-01347	ifying Number (if you kr	ow it)					
C. di							
Section 2.	The Work Under Co	onsiderati	on for Publ	ication			
any aspect of the su statistical analysis, e	bmitted work (including	but not limit	ed to grants, o			, commercial, private foundation, etc.) fo , design, manuscript preparation,	r
•				ave more than	ո one entity բ	press the "ADD" button to add a row	.
Excess rows can be	e removed by pressin	g the "X" bu	tton.				
Name of Institution	on/Company	Grant?		on-Financial Support <mark>?</mark>	Other?	Comments	
The general insurance	association of Japan	√			Joi	int Collaborative Research	
Section 3.	Relevant financial	activities o	outside the	submitted	work.		
of compensation) clicking the "Add -	with entities as descri	bed in the in port relation	nstructions. Uships that w	Jse one line f	or each entit	relationships (regardless of amount y; add as many lines as you need by 6 months prior to publication .	
Section 4.	Intellectual Proper	ty Pater	ats & Copyr	iahts —			
	mtenectuai Proper	ty Pater	its & Copyr	ignts -			
Do you have any p	patents, whether plan	ned, pendin	g or issued, l	oroadly releva	ant to the wo	ork?	

Daimon 2



Section 5. Polationships not severed above
Relationships not covered above
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Dr. Daimon reports grants from The general insurance association of Japan, during the conduct of the study; .

Evaluation and Feedback

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Daimon 3



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Relevant financial activities outside the submitted work.

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

patent



Section 1. Identifying Inform	nation			
identifying illioni	lation -			
1. Given Name (First Name) Kota	Surname (Last Nam Watanabe	e)		3. Date 25-November-2017
4. Are you the corresponding author?	✓ Yes No			
5. Manuscript Title A 20-year prospective longitudinal stuc sectional study	ly on degeneration of	the cervical spin	e using MRI	I in volunteers: follow-up of a cross
6. Manuscript Identifying Number (if you kr JBJS-D-17-01347	now it)			
Section 2. The Work Under Co	onsideration for Pu	blication		
Did you or your institution at any time rece any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grant			
If yes, please fill out the appropriate info Excess rows can be removed by pressin	ormation below. If you		one entity	press the "ADD" button to add a row.
Name of Institution/Company	Grant? Personal Fees?	Non-Financial Support?	Other?	Comments
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Relevant financial	activities outside t	ne submitted	work.	
Place a check in the appropriate boxes of compensation) with entities as descr clicking the "Add +" box. You should re	ibed in the instruction port relationships that	s. Use one line fo were present d	or each entit	ty; add as many lines as you need by
Are there any relevant conflicts of interest	est? Yes ✓ N	0		
Section 4. Intellectual Proper	rty Patents & Cop	yrights		
Do you have any patents, whether plan	ned, pending or issued	l, broadly releva	nt to the wo	ork? ☐ Yes ✓ No



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

Matsumoto 1



Section 1. Identifying Inform	ation		
1. Given Name (First Name) Morio	2. Surname (Last Name) Matsumoto		3. Date 21-November-2017
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author	or's Name
 Manuscript Title A 20-year prospective longitudinal stud sectional study 	y on degeneration of the	cervical spine using N	ARI in volunteers: follow-up of a cross
6. Manuscript Identifying Number (if you kn D-17-01347	ow it)	_	
Section 2. The Work Under Co	onsideration for Public	cation	
any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, da	ta monitoring board, st	ent, commercial, private foundation, etc.) for udy design, manuscript preparation, ity press the "ADD" button to add a row.
Excess rows can be removed by pressing	•	e more than one ent	button to add a row.
Name of Institution/Company	Grant'	n-Financial upport?	Comments
The General Insurance Association of Japan	✓		Joint Collaborative Research
Section 3. Relevant financial	activities outside the s	submitted work.	
Place a check in the appropriate boxes i of compensation) with entities as descri clicking the "Add +" box. You should rep Are there any relevant conflicts of intere	bed in the instructions. Us port relationships that wei est? Yes √ No	se one line for each er re present during th	ntity; add as many lines as you need by
Section 4. Intellectual Proper	ty Patents & Copyri	ghts	
Do you have any patents, whether plant	ned, pending or issued, br	oadly relevant to the	work? ☐ Yes 🗸 No

Matsumoto 2



Section 5.					
Re	elationships not covered above				
	ionships or activities that readers could perceive to have influenced, or that give the appearance of ng, what you wrote in the submitted work?				
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Section 6.	sclosure Statement				
DI	sciosare statement				
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Nakamura 1



Section 1. Identifying Inform	ation				
1. Given Name (First Name) Masaya	2. Surname (Last Name) Nakamura		3. Date 23-February-2018		
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author	or's Name		
5. Manuscript Title A 20-year prospective longitudinal study on degeneration of the cervical spine using MRI in volunteers: follow-up of a cross sectional study					
Manuscript Identifying Number (if you kn	ow it)	_			
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