

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

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

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Ayman	2. Surname (Last Name) Assi	3. Date 30-October-2017
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Bassel G. Diebo MD
5. Manuscript Title From Static Spinal Alignment to Dynamic Body Balance: Utilizing Motion Analysis in Spinal Deformity Surgery		
6. Manuscript Identifying Number (if you know it) 		

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Dr. Assi 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)

Ashish

2. Surname (Last Name)

Patel

3. Date

30-October-2017

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Bassel G. Diebo MD

5. Manuscript Title

From Static Spinal Alignment to Dynamic Body Balance: Utilizing Motion Analysis in Spinal Deformity Surgery

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Section 1. Identifying Information

1. Given Name (First Name)
Bassel

2. Surname (Last Name)
Diebo

3. Date
30-October-2017

4. Are you the corresponding author? ☒ Yes ☐ No

5. Manuscript Title
From Static Spinal Alignment to Dynamic Body Balance: Utilizing Motion Analysis in Spinal Deformity Surgery

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Section 1. Identifying Information

1. Given Name (First Name) Carl	2. Surname (Last Name) Paulino	3. Date 31-October-2017
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Bassel G. Diebo, MD
5. Manuscript Title From Static Spinal Alignment to Dynamic Body Balance: Utilizing Motion Analysis in Spinal Deformity Surgery		
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Are there any relevant conflicts of interest? ☒ Yes ☐ No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
DePuy, A Johnson & Johnson Company	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consultant

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☐ Yes ☒ No

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Dr. Paulino reports other from DePuy, A Johnson & Johnson Company, outside the submitted work; .

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Section 1. Identifying Information

1. Given Name (First Name)

Ellen

2. Surname (Last Name)

Godwin

3. Date

31-October-2017

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☐ Yes

☒ No

Corresponding Author's Name

Bassel G. Diebo, MD

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Dr. Godwin has nothing to disclose.

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Other: Anything not covered under the previous three boxes

Pending: The patent has been filed but not issued

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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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Frank	2. Surname (Last Name) Schwab	3. Date 31-October-2017
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Bassel G. Diebo, MD
5. Manuscript Title From Static Spinal Alignment to Dynamic Body Balance: Utilizing Motion Analysis in Spinal Deformity Surgery		
6. Manuscript Identifying Number (if you know it) 		

Section 2. The Work Under Consideration for Publication

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 submitted work.

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Are there any relevant conflicts of interest? ☒ Yes ☐ No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
DePuy Spine	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Paid trough ISSGF
NuVasive	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Paid trough ISSGF
K2M	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Paid trough ISSGF
Styker	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Paid trough ISSGF
Zimmer Biomet	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consulting, Speaking/teaching arrangements
Medtronic	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consulting, Speaking/teaching arrangements

ICMJE Form for Disclosure of Potential Conflicts of Interest

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
K2M	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consulting, Speaking/teaching arrangements
Medicrea	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consulting
NuVasive	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consulting, Speaking/teaching arrangements
Nemaris INC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Board of Directors, Shareholder

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

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Section 6. Disclosure Statement

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Dr. Schwab reports grants from DePuy Spine, grants from NuVasive, grants from K2M, grants from Styker, personal fees from Zimmer Biomet, personal fees from Medtronic, personal fees from K2M, personal fees from Medicrea, personal fees from NuVasive, other from Nemaris INC, outside the submitted work; .

ICMJE Form for Disclosure of Potential Conflicts of Interest

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Nicholas	2. Surname (Last Name) Post	3. Date 30-October-2017
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Bassel G. Diebo MD
5. Manuscript Title From Static Spinal Alignment to Dynamic Body Balance: Utilizing Motion Analysis in Spinal Deformity Surgery		
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Dr. Post 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) Neil	2. Surname (Last Name) Shah	3. Date 30-October-2017
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Bassel G. Diebo MD
5. Manuscript Title From Static Spinal Alignment to Dynamic Body Balance: Utilizing Motion Analysis in Spinal Deformity Surgery		
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Are there any relevant conflicts of interest? ☐ Yes ☒ No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☐ Yes ☒ No

ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Shah 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)
Qais

2. Surname (Last Name)
Naziri

3. Date
30-October-2017

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Bassel G. Diebo MD

5. Manuscript Title
From Static Spinal Alignment to Dynamic Body Balance: Utilizing Motion Analysis in Spinal Deformity Surgery

6. Manuscript Identifying Number (if you know it)

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Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☐ Yes ☒ No

ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Naziri 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)
Robert

2. Surname (Last Name)
Pivec

3. Date
30-October-2017

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name
Bassel G. Diebo MD

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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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Virginie	2. Surname (Last Name) Lafage	3. Date 31-October-2017
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Bassel G. Diebo, MD
5. Manuscript Title From Static Spinal Alignment to Dynamic Body Balance: Utilizing Motion Analysis in Spinal Deformity Surgery		
6. Manuscript Identifying Number (if you know it) 		

Section 2. The Work Under Consideration for Publication

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.)?

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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**.

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Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
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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. Lafage reports grants from SRS, grants from NuVasive, grants from Stryker, grants from K2M, grants from DePuy Spine, personal fees from DePuy Spine, personal fees from MSD, personal fees from K2M, personal fees from NuVasive, other from Nemaris INC, outside the submitted work; .

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