

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.

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Section 1. Identifying Infor	rmation	
1. Given Name (First Name) Michael	2. Surname (Last Name) Kelly	3. Date 16-October-2017
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Name Andrew Pugely
5. Manuscript Title Operative management of degenerat	tive spondylolithesis: A crit	ical analysis review
6. Manuscript Identifying Number (if you	know it)	
Section 2. The Work Under	Consideration for Publ	ication
		m 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 V No

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Are there any relevant conflicts of interest?	Y	es 🗸	/	No
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?	Yes	V N	ю



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Dr. Kelly has nothing to disclose.

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Section 1.				
Section 1.	Identifying Infor	mation		
1. Given Name (Fi Nathan	rst Name)	2. Surname (La Hendrickson	,	3. Date 17-October-2017
4. Are you the cor	responding author?	Yes 🗸	/ No	Corresponding Author's Name Andrew Pugely
5. Manuscript Title Operative mana	e gement of degenerat	ive spondylolithe	esis: A critic	cal analysis review
6. Manuscript Ide	ntifying Number (if you	know it)		
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🖌 No

Yes

Are there any relevant conflicts of interest?	Y	es 🗸	/	No
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statistical analysis, etc.)?

Are there any relevant conflicts of interest?

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?		Yes	N/	0
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1. Given Name (F Andrew	irst Name)	2. Surname (Last Name) Pugely	3. Date 18-October-2017
4. Are you the co	rresponding author?	✓ Yes No	
5. Manuscript Tit Operative mana		tive spondylolithesis: A critical analysis rev	view
6. Manuscript Ide	entifying Number (if you	know it)	
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Are there any relevant conflicts of interest? Yes

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1. Given Name (Fi Zoher	irst Name)	2. Surname Ghogawala	(Last Name) a		3. Date 18-October-2017
4. Are you the co	responding author?	Yes	✔ No	Corresponding Author's Na Andrew Pugely	ame
5. Manuscript Titl Operative mana	e gement of degenerati	ve spondylolit	hesis: A crit	ical analysis review	
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