

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

Licari 1



Section 1.	Identifying Inform	nation					
1. Given Name (Fi Hannah	. , ,	2. Surname (Last Name) Licari		3. Date 05-January-2020			
4. Are you the cor	responding author?	✓ Yes No					
5. Manuscript Title Team Approach		ute L4-5 disc herniation					
6. Manuscript Ide	ntifying Number (if you kr	now it)					
Section 2.	The Work Under C	onsideration for Publi	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	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 Prope	rty Patents & Copyri	ghts				
Do you have any	patents, whether plan	ned, pending or issued, b	roadly relevant to the work	? Yes 🗸 No			

Licari 2



Section 5. Relationships not sovered 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 statements On occasion, journals may ask authors to disclose further information about reported relationships.
Section 6. Disclosure Statement
Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Hannah Licari has nothing to disclose.

Evaluation and Feedback

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Licari 3



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

Tekmyster 1



Section 1.	Identifying Inform	nation					
1. Given Name (First Name) 2. Surname (Last Name) Gene Tekmyster			3. Date 07-January-2021				
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Zorica Buser, PhD				
5. Manuscript Title Team Approach:		ute L4-5 disc herniation					
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 ita monitoring board, study design, manuscript preparation,				
Section 3.	Relevant financial	activities outside the s	submitted work.				
of compensation clicking the "Add) with entities as descri	bed in the instructions. Us port relationships that wer	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 & Copyrig	ghts				
Do you have any	patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No				

Tekmyster 2



Section 5.	
Section 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?
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
	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. Tekmyster ha	as nothing to disclose.

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Tekmyster 3



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Lantz 1



Section 1.	Identifying Inform	nation							
1. Given Name (Fii Justin	rst Name)	2. Surname (Last Name) Lantz		3. Date 30-Decemb	per-2020				
4. Are you the corresponding author? ✓ Yes No									
5. Manuscript Title Team Approach: Management of an acute L4-5 disc herniation									
6. Manuscript Ider	ntifying Number (if you kr	now it)							
Section 2.	The Work Under Co	onsideration for Publ	cation						
any aspect of the s statistical analysis,	ubmitted work (including	ive payment or services frong but not limited to grants, dest?	. , .	-					
Section 3.	Relevant financial	activities outside the	submitted work.						
of compensation clicking the "Add Are there any rele) with entities as descri		lse one line for each	entity; add as many	lines as you need by				
Name of Entity		Grant	on-Financial Other	? Comments					
SI-Bone Inc.				PT Consultant					
Section 4.									
Section 4.	Intellectual Proper	rty Patents & Copyri	ghts						
Do you have any	patents, whether plan	ned, pending or issued, b	roadly relevant to th	ne work? Yes	✓ No				

Lantz 2



Section 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?
✓ Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
No other rela	tionships/conditions/circumstances that present a potential conflict of interest
I am on the follo	wing committees:
	l Public Relations Committee my of Orthopedic Manual Physical Therapists (AAOMPT)
Clinical Practice North American	Guidelines Committee Spine Society
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statement rnals may ask authors to disclose further information about reported relationships.
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committees: Soc	s other financial support from SI-Bone Inc., outside the submitted work; and he is on the following cial Media and Public Relations Committee American Academy of Orthopedic Manual Physical Therapists cal Practice Guidelines Committee North American Spine Society.

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Wang 1



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1. Given Name (Fir Jeffrey	st Name)	2. Surnan Wang	ne (Last Nar	me)		3. Date 07-January-2021		
4. Are you the corr	Yes	✓ No	-	Corresponding Author's Name Zorica Buser				
5. Manuscript Title Team Approach: Management of an acute L4-5 disc herniation								
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Name of Entity		Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments		
Biomet, Seaspine, Am	edica, Synthes		√			Royalties		
Bone Biologics, Pearld Surgitech	liver, Electrocore,				✓	Investments/Options		
Fellowship Funding -	AO Foundation				✓	(paid directly to institution)		
Board of Directors: AC) Foundation		✓			Board of Directors (20,000 honorariums for board position, plus travel for board meetings)		
Board of Directors: So and Therapeutics	ciety for Brain mapping				√	Board of Directors		

Wang 2



Name of Entity	Grant?	Personal Fees	Non-Financial Support?	Other?	Comments	
Editorial Boards: Spine, The Spine Journal, Clinical Spine Surgery, Global Spine Journal				✓	Editorial Boards	
Section 4. Intellectual Propert	y Pate	ents & Co _l	pyrights			
Do you have any patents, whether plann	ed, pend	ing or issue	ed, broadly releva	nt to the	work? ☐ Yes ✓ No	
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Are there other relationships or activities potentially influencing, what you wrote i	that read	ders could ¡		nfluenced	d, or that give the appearance of	
Yes, the following relationships/cond	itions/cir	cumstance	es are present (exp	olain belo	w):	
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Dr. Wang reports personal fees from Bio Surgitech, other from Fellowship Fundir from Board of Directors: Society for Brair Clinical Spine Surgery, Global Spine Jour	ng - AO F n mappin	oundation g and Ther	, personal fees fro apeutics, other fro	m Board	of Directors: AO Foundation, other	

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Section 1.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

2. Surname (Last Name)

3. Date

✓ Yes	No				
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u know it)					
r Considera	tion for P	ublication			
ling but not lin	nited to gran	its, data monitoring			c.) for
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scribed in the report relation terest?	instruction onships tha Yes	ns. Use one line fo t were present d	or each er	ntity; add as many lines as you need	by l
Grant?	Personal Fees	Non-Financial Support?	Other?	Comments	
	✓			consultancy (past)	
	√			consultancy (past)	
	√			consultancy	
	✓			consultancy	
			√	research support (past, paid directly to institution)	
			✓	research support (paid directly to institution)	
t	acute L4-5 di u know it) r Considerat eceive paymen ding but not lim terest? ial activities es in the table scribed in the report relatio terest? information b	acute L4-5 disc herniation unknow it) r Consideration for Preceive payment or services ding but not limited to granterest? Yes ial activities outside to indicate scribed in the instruction report relationships that terest? Yes Grant? Personal Fees? V	acute L4-5 disc herniation u know it) r Consideration for Publication eceive payment or services from a third party ding but not limited to grants, data monitoring terest? Yes No ial activities outside the submitted es in the table to indicate whether you has scribed in the instructions. Use one line for report relationships that were present deterest? Yes No information below. Grant? Personal Non-Financial Support? V	acute L4-5 disc herniation u know it) r Consideration for Publication eceive payment or services from a third party (governmeding but not limited to grants, data monitoring board, st terest? Yes No ial activities outside the submitted work. es in the table to indicate whether you have finance scribed in the instructions. Use one line for each erreport relationships that were present during the terest? Yes No information below. Grant? Personal Non-Financial Support? Other? Fees? Support?	acute L4-5 disc herniation u know it) r Consideration for Publication eceive payment or services from a third party (government, commercial, private foundation, et ding but not limited to grants, data monitoring board, study design, manuscript preparation, terest? Yes No ial activities outside the submitted work. es in the table to indicate whether you have financial relationships (regardless of amostribed in the instructions. Use one line for each entity; add as many lines as you need report relationships that were present during the 36 months prior to publication. terest? Yes No information below. Grant? Personal Support? Comments Support? Comments Consultancy (past) Consultancy (past) Consultancy Consultancy



Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Next Science				✓	research support (paid directly to institution)
AOSpine, NASS			✓		reimbursement for meeting travels
Section 4. Intellectual Propert	ty Pato	ents & Co _l	pyrights		
Do you have any patents, whether plann	ned, pend	ing or issue	ed, broadly releva	nt to the	work? Yes ✓ No
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At the time of manuscript acceptance, jo On occasion, journals may ask authors to					•
Section 6. Disclosure Stateme	nt				
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Dr. Buser reports personal fees from AOS fees from The Scripps Research institute financial support from AOSpine, NASS, of	, other fro	om SeaSpir	ne, other from Mo		



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