

#### **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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## Intellectual Property.

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

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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

1 Tan



Section 1. Identifying	Information	
1. Given Name (First Name) Timothy	2. Surname (Last Name) Tan	3. Date 27-April-2014
4. Are you the corresponding auth	or? Yes 🗸 No	Corresponding Author's Name Edward Ebramzadeh
5. Manuscript Title Imaging Criteria for the Quanti	fication of Disc Degeneration: A Sy	stematic Review
6. Manuscript Identifying Number	(if you know it)	
		_
Section 2. The Work U	nder Consideration for Public	cation
	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 fir	nancial activities outside the s	submitted work.
of compensation) with entities	as described in the instructions. Us nould report 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	Property Patents & Copyrig	ghts
Do you have any patents, whet	her planned, pending or issued, br	oadly relevant to the work? Yes V No

Tan 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. Tan has noth	ing 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.

Tan 3



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Sangiorgio 1



Section 1.	Identifying Inform	nation						
1. Given Name (Fir Sophia			ne (Last Name gio	)		3. Date 27-April-2014		
4. Are you the corr	esponding author?	Yes	<b>√</b> No	Correspond Edward Ek	•			
5. Manuscript Title Imaging Criteria	for the Quantification	of Disc Deg	generation: A	Systematic Rev	view			
6. Manuscript Iden	ntifying Number (if you kr	now it)						
Section 2.	The Work Under C	onsidera <sup>.</sup>	tion for Puk	olication				
any aspect of the su statistical analysis, o Are there any rele	titution <b>at any time</b> rece ubmitted work (including etc.)? evant conflicts of intere	g but not lin		, data monitoring				) TO
Section 3.	Relevant financial	activities	outside th	e submitted	work.			
of compensation clicking the "Add Are there any rele	he appropriate boxes ) with entities as descr +" box. You should re evant conflicts of intere out the appropriate infe	ibed in the port relation strength of the port of the	einstructions. Onships that v Yes	Use one line fo vere <b>present d</b> o	or each end uring the	tity; add as many lines	s as you need	
Name of Entity		Grant?	Personal N	lon-Financial Support?	Other?	Comments		
Zimmer		<b>✓</b>						
DePuy		<b>√</b>						
TriMed		<b>√</b>						
Extremity Medical		<b>✓</b>						
Biomet		<b>✓</b>						
NuVasive		<b>✓</b>						

Sangiorgio 2



Section 4. Intellectual Property Patents & Copyrights
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Volume
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
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Sangiorgio reports grants from Zimmer, grants from DePuy, grants from TriMed, grants from Extremity Medical, grants from Biomet, grants from NuVasive, outside the submitted work; .

### **Evaluation and Feedback**

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Sangiorgio 3



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Ebramzadeh 1



Section 1. Identifying Inform	ation			
Given Name (First Name)  Edward	2. Surname (Last Name Ebramzadeh	<u>e</u> )	3. Date 27-April-2014	
4. Are you the corresponding author?	✓ Yes No			
5. Manuscript Title Imaging Criteria for the Quantification o	of Disc Degeneration: A	Systematic Review		
6. Manuscript Identifying Number (if you kn	ow it)			
Section 2. The Work Under Co	onsideration for Pul	blication		
Did you or your institution <b>at any time</b> recei any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants	s, data monitoring board, s		
Section 3. Relevant financial	activities outside th	ne submitted work.		
Place a check in the appropriate boxes i of compensation) with entities as descriclicking the "Add +" box. You should repart there any relevant conflicts of interesting the second conflicts of the second confli	bed in the instructions port relationships that wast?    Yes    No	. Use one line for each owere <b>present during t</b>	entity; add as many lines	as you need by
Name of Entity	Grant? Personal Fees?	Non-Financial Other Support?	Comments	
Zimmer	<b>✓</b>			
DePuy	<b>✓</b>			
riMed	<b>✓</b>			
extremity Medical	<b>✓</b>			
liomet	<b>✓</b>			
luVasive	<b>✓</b>			

Ebramzadeh 2



Section 4. Intellectual Property - Potents & Conscients
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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Editorial Board: Journal of Orthopaedic Trauma, JBJS, JAB-FM  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.
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Campbell 1



Section 1. Ide	entifying Informa	ntion			
1. Given Name (First Na Patricia	•	2. Surname (Last Name) Campbell		3. Date 27-April-2014	
4. Are you the correspo	onding author?	Yes 🗸 No	Corresponding Autho		
5. Manuscript Title Imaging Criteria for t	he Quantification of	Disc Degeneration: A	Systematic Review		
6. Manuscript Identifyir	ng Number (if you kno	w it)			
Section 2. The	e Work Under Cor	nsideration for Pub	lication		
	itted work (including b	out not limited to grants,	data monitoring board, stu	ent, commercial, private foundation, et udy design, manuscript preparation,	c.) for
Section 3. Rel	levant financial a	ctivities outside th	e submitted work.		
of compensation) wit clicking the "Add +" b Are there any relevan	th entities as describe oox. You should repond to conflicts of interes	ed in the instructions. ort relationships that w t?  Yes  No	Use one line for each er vere <b>present during the</b>	ial relationships (regardless of amo ntity; add as many lines as you need a <b>36 months prior to publication</b> .	by by
If yes, please fill out th	ne appropriate infor	mation below.			
Name of Entity		Grant? Personal Fees?	on-Financial Other?	Comments	
DePuy		<b>✓</b>			
Wright Medical Technolog	ıy	<b>✓</b>			
Biomet		<b>✓</b>			
NuVasive					

Campbell 2



Section 4. Intellectual Property Patents & Copyrights					
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Borkowski 1



Section 1.	Identifying Inform	nation			
1. Given Name (Fi Sean	rst Name)	2. Surname (Last Name) Borkowski	3. Date 27-April-2014		
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Edward Ebramzadeh		
5. Manuscript Title Imaging Criteria		of Disc Degeneration: A Sy	stematic Review		
6. Manuscript Ide	ntifying Number (if you kr	now it)			
			_		
Section 2.	The Work Under C	onsideration for Public	cation		
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 interest?  Yes  No					
Section 3.	Relevant financial	activities outside the s	submitted work.		
of compensation clicking the "Add	n) with entities as descr	ibed 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.		
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Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No		

Borkowski 2



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Dr. Borkowski has nothing to disclose.

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