ICMJE Form for Disclosure of Potential Conflicts of Interest

**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.

1. **Identifying information.**
2. **The work under consideration for publication.**
3. **Relevant financial activities outside the submitted work.**
4. **Intellectual Property.**
5. **Relationships not covered above.**

**Definitions.**

- **Entity:** government agency, foundation, commercial sponsor, academic institution, etc.
- **Grant:** A grant from an entity, generally (but not always) paid to your organization
- **Personal Fees:** Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations
- **Non-Financial Support:** Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.
- **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

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Anari
ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 1. Identifying Information**

1. Given Name (First Name)  
   Jason  

2. Surname (Last Name)  
   Anari  

3. Date  
   28-May-2020  

4. Are you the corresponding author?  
   ✔ Yes  
   □ No  

5. Manuscript Title  
   What’s Important: Managing the Impact of Coronavirus on Pediatric Spine 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.**

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  
   ✔ 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

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. Anari has nothing to disclose.

Evaluation and Feedback

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For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.


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ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 1. Identifying Information**

1. Given Name (First Name)  
   Keith  

2. Surname (Last Name)  
   Baldwin  

3. Date  
   28-May-2020  

4. Are you the corresponding author?  
   Yes ☑  No  

Corresponding Author’s Name  
Jason Anari, MD  

5. Manuscript Title  
   What’s Important: Managing the Impact of Coronavirus on Pediatric Spine Surgery  

6. Manuscript Identifying Number (if you know it)  

**Section 2. The Work Under Consideration for Publication**

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Are there any relevant conflicts of interest?  
   Yes ☑  No  

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Are there any relevant conflicts of interest?  
   Yes ☑  No  

If yes, please fill out the appropriate information below.

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<th>Name of Entity</th>
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<th>Non-Financial Support?</th>
<th>Other?</th>
<th>Comments</th>
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<td>☑</td>
<td>☑</td>
<td>☑</td>
<td>☑</td>
<td>Stock</td>
</tr>
</tbody>
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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  

Baldwin
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Dr. Baldwin reports other from Pfizer, Inc., outside the submitted work.

Evaluation and Feedback

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### Section 1. Identifying Information

1. Given Name (First Name)  
   Patrick

2. Surname (Last Name)  
   Cahill

3. Date  
   28-May-2020

4. Are you the corresponding author?  
   Yes [ ]  No [x]

   Corresponding Author’s Name  
   Jason Anari, MD

5. Manuscript Title  
   What’s Important: Managing the Impact of Coronavirus on Pediatric Spine Surgery

6. Manuscript Identifying Number (if you know it)

### Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?  
Yes [ ]  No [x]

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Yes [x]  No [ ]

If yes, please fill out the appropriate information below.

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<th>Comments</th>
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<tr>
<td>NuVasive, Inc.</td>
<td>[ ]</td>
<td>[x]</td>
<td>[ ]</td>
<td>[ ]</td>
<td>paid consultant</td>
</tr>
<tr>
<td>Setting Scoliosis Straight Foundation</td>
<td>[x]</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
<td>Research grants from SSSF received in support of Harms Study Group research</td>
</tr>
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<td>Children’s Spine Study Group</td>
<td>[x]</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
<td>Grant in support of research with the Children’s Spine Study Group</td>
</tr>
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☐ Yes  ☑ No

Section 5. Relationships not covered above

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- AAOS: Board or committee member
- Journal of Bone and Joint Surgery - American: Editorial or governing board
- Pediatric Orthopaedic Society of North America: Board or committee member
- Scoliosis Research Society: Board or committee member
- Spine Deformity: Editorial or governing board

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Dr. Cahill reports personal fees from NuVasive, Inc., grants from Setting Scoliosis Straight Foundation, grants from Children's Spine Study Group, outside the submitted work; and AAOS: Board or committee member Journal of Bone and Joint Surgery - American: Editorial or governing board 
Pediatric Orthopaedic Society of North America: Board or committee member Scoliosis Research Society: Board or committee member Spine Deformity: Editorial or governing board.

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   John (Jack)

2. Surname (Last Name)  
   Flynn

3. Date  
   28-May-2020

4. Are you the corresponding author?  
   [ ] Yes  
   [x] No

   Corresponding Author’s Name  
   Jason Anari, MD

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<td>[ ]</td>
<td>IP royalties</td>
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Dr. Flynn reports other from Wolters Kluwer Health - Lippincott Williams & Wilkins, personal fees from Biomet, outside the submitted work; and American Board of Orthopaedic Surgery, Inc.: Board or committee member.

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