

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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#### 2. The work under consideration for publication.

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#### 4. Intellectual Property.

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

#### 5. Relationships not covered above.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Parham	2. Surname (Last Name) Rasoulinejad	3. Date 30-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Chris Bailey
5. Manuscript Title The impact of surgical-site infection on functional recovery and surgical outcomes after adult posterior thoracolumbar spinal surgery		
6. Manuscript Identifying Number (if you know it)		

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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

### 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. Rasoulinejad has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Chris

2. Surname (Last Name)  
Bailey

3. Date  
28-October-2020

4. Are you the corresponding author?  Yes  No

5. Manuscript Title  
The impact of surgical-site infection on functional recovery and surgical outcomes after adult posterior thoracolumbar spinal 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

### 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
Medtronic Canada	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	research and fellowship support

### 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. Bailey reports grants from Medtronic Canada, outside the submitted work; .

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Fawaz

2. Surname (Last Name)  
Siddiqi

3. Date  
30-October-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Chris Bailey

5. Manuscript Title  
The impact of surgical-site infection on functional recovery and surgical outcomes after adult posterior thoracolumbar spinal surgery

6. Manuscript Identifying Number (if you know it)

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Dr. Siddiqi 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) Jennifer	2. Surname (Last Name) Urquhart	3. Date 30-October-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Chris Bailey
5. Manuscript Title The impact of surgical-site infection on functional recovery and surgical outcomes after adult posterior thoracolumbar spinal surgery		
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Dr. Urquhart has nothing to disclose.

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1. Given Name (First Name)  
Kevin

2. Surname (Last Name)  
Gurr

3. Date  
30-October-2020

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Yes  No

Corresponding Author's Name  
Chris Bailey

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Dr. Gurr has nothing to disclose.

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