ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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**Royalties:** Funds are coming in to you or your institution due to your patent
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Yohei

2. Surname (Last Name)  Takahashi

3. Date  22-February-2021

4. Are you the corresponding author?  ✔ No

5. Manuscript Title
Rate of Scoliosis Correction after Anterior Spinal Growth Tethering (ASGT) for Idiopathic Scoliosis Correlates with Height Velocity and Depends on the Initial Sanders Stage

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?  ✔ No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  ✔ No
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Section 6. Disclosure Statement

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Dr. 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)  Carrie
2. Surname (Last Name)  Bartley
3. Date  22-February-2021
4. Are you the corresponding author?  No

Corresponding Author’s Name  Peter Newton, MD

5. Manuscript Title
Rate of Scoliosis Correction after Anterior Spinal Growth Tethering (ASGT) for Idiopathic Scoliosis Correlates with Height Velocity and Depends on the Initial Sanders Stage

6. Manuscript Identifying Number (if you know it)

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Section 1. Identifying Information

1. Given Name (First Name) Tracey
2. Surname (Last Name) Bastrom
3. Date 22-February-2021
4. Are you the corresponding author? No
5. Manuscript Title
Rate of Scoliosis Correction after Anterior Spinal Growth Tethering (ASGT) for Idiopathic Scoliosis Correlates with Height Velocity and Depends on the Initial Sanders Stage
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Section 1. Identifying Information

1. Given Name (First Name)  
   Peter

2. Surname (Last Name)  
   Newton

3. Date  
   23-February-2021

4. Are you the corresponding author?  
   Yes  ✔  No

5. Manuscript Title  
   Rate of Scoliosis Correction after Anterior Spinal Growth Tethering (ASGT) for Idiopathic Scoliosis Correlates with Height Velocity and Depends on the Initial Sanders Stage

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<th>Name of Entity</th>
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3. Relevant financial activities outside the submitted work.

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Royalties: Funds are coming in to you or your institution due to your patent
### Section 1. Identifying Information

1. **Given Name (First Name)**  
   Burt

2. **Surname (Last Name)**  
   Yaszay

3. **Date**  
   25-February-2021

4. **Are you the corresponding author?**  
   - Yes
   - No ✓

**Corresponding Author’s Name**  
Peter Newton MD

5. **Manuscript Title**  
Rate of Scoliosis Correction after Anterior Spinal Growth Tethering (ASGT) for Idiopathic Scoliosis Correlates with Height Velocity and Depends on the Initial Sanders Stage

6. **Manuscript Identifying Number (if you know it)**  

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### 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 ✓

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### 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

If yes, please fill out the appropriate information below.

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<th>Personal Fees?</th>
<th>Non-Financial Support?</th>
<th>Other?</th>
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<td>Biogen</td>
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</table>
Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ✔ Yes  ❌ No
If yes, please fill out the appropriate information below. If you have more than one entity press the “ADD” button to add a row. Excess rows can be removed by pressing the “X” button.

<table>
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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. Yaszay reports grants and personal fees from DePuy Synthes Spine, grants and personal fees from Nuvasive, personal fees from Medtronic, grants and personal fees from Orthopediatrics, grants and personal fees from K2M/Stryker, personal fees from Globus, grants from Setting Scoliosis Straight Foundation, personal fees from Biogen, outside the submitted work; In addition, Dr. Yaszay has a patent K2M/Stryker with royalties paid.
Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.
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.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Wataru
2. Surname (Last Name)     Saito
3. Date                   22-February-2021
4. Are you the corresponding author?  Yes ✔ No
Corresponding Author’s Name
Peter Newton, MD
5. Manuscript Title

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.)?  Yes ☐ No ✔

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Dr. Saito has nothing to disclose.

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.