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ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 1. Identifying Information**

1. Given Name (First Name)  
   Xuefei

2. Surname (Last Name)  
   Ye

3. Date  
   17-March-2020

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

5. Manuscript Title  
   Comparison of the effects of general and local anesthesia in lumbar interlaminar endoscopic surgery

6. Manuscript Identifying Number (if you know it)  
   APM-20-623

**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.**

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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. Ye 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) Sheng
2. Surname (Last Name) Wang
3. Date 17-March-2020
4. Are you the corresponding author? Yes ✓ No
   Corresponding Author’s Name Sunren Sheng
5. Manuscript Title
   Comparison of the effects of general and local anesthesia in lumbar interlaminar endoscopic surgery
6. Manuscript Identifying Number (if you know it)
   APM-20-623

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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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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
   Ai-Min

2. Surname (Last Name)
   Wu

3. Date
   17-March-2020

4. Are you the corresponding author?  
   [ ] Yes  ✔ No  
   Corresponding Author’s Name
   Sunren Sheng

5. Manuscript Title
   Comparison of the effects of general and local anesthesia in lumbar interlaminar endoscopic surgery

6. Manuscript Identifying Number (if you know it)
   APM-20-623

Section 2. The Work Under Consideration for Publication

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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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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Lin zheng
2. Surname (Last Name)  Xie
3. Date  16-March-2020
4. Are you the corresponding author?  No

5. Manuscript Title
Comparison of the effects of general and local anesthesia in lumbar interlaminar endoscopic surgery

6. Manuscript Identifying Number (if you know it)

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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?  No
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Section 1. Identifying Information

1. Given Name (First Name)  
Xiangyang

2. Surname (Last Name)  
Wang

3. Date  
17-March-2020

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

5. Manuscript Title  
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1. Given Name (First Name)  Jiao-Xiang
2. Surname (Last Name)  Chen
3. Date  16-March-2020
4. Are you the corresponding author?  ☑ No

Corresponding Author’s Name: Sun-Ren Sheng

5. Manuscript Title
Comparison of the effects of general and local anesthesia in lumbar interlaminar endoscopic surgery

6. Manuscript Identifying Number (if you know it)
APM-20-623

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**Definitions.**

- **Entity:** government agency, foundation, commercial sponsor, academic institution, etc.
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- **Non-Financial Support:** Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.
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Section 1. Identifying Information

1. Given Name (First Name)  
   Hui

2. Surname (Last Name)  
   Xu

3. Date  
   17-March-2020

4. Are you the corresponding author?  
   Yes ☐  No ☑

   Corresponding Author’s Name  
   Sunren Sheng

5. Manuscript Title  
   Comparison of the effects of general and local anesthesia in lumbar interlaminar endoscopic surgery

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Section 1. Identifying Information

1. Given Name (First Name) Sunren
2. Surname (Last Name) Sheng
3. Date 17-March-2020
4. Are you the corresponding author? ☑ Yes ☐ No
5. Manuscript Title Comparison of the effects of general and local anesthesia in lumbar interlaminar endoscopic surgery
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