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.

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2. The work under consideration for publication.
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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)  
Tae Hoon

2. Surname (Last Name)  
Kim

3. Date  
09-April-2020

4. Are you the corresponding author?  
☐ Yes  ☑ No  
Corresponding Author’s Name  
Min Cheol Chang

5. Manuscript Title  
Spinal Cord Injury during Cervical Percutaneous Epidural Neuroplasty

6. Manuscript Identifying Number (if you know it)  
APM-20-215

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Are there any relevant conflicts of interest?  
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Section 6. Disclosure Statement

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Dr. Kim 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)  Hee Kyung
2. Surname (Last Name)  Cho
3. Date  09-April-2020
4. Are you the corresponding author?  Yes  No

Corresponding Author’s Name  Min Cheol Chang

5. Manuscript Title
Spinal Cord Injury during Cervical Percutaneous Epidural Neuroplasty

6. Manuscript Identifying Number (if you know it)
APM-20-215

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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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Cho has nothing to disclose.

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## Section 1. Identifying Information

1. **Given Name (First Name)**
   - Mathieu

2. **Surname (Last Name)**
   - Boudier-Revéret

3. **Date**
   - 09-April-2020

4. **Are you the corresponding author?**
   - [ ] Yes
   - ✔ Yes

5. **Manuscript Title**
   - Spinal Cord Injury during Cervical Percutaneous Epidural Neuroplasty

6. **Manuscript Identifying Number (if you know it)**
   - APM-20-215

## 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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Dr. Boudier-Revéret has nothing to disclose.

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Chang
### Section 1. Identifying Information

1. Given Name (First Name)  
   Min Cheol  

2. Surname (Last Name)  
   Chang  

3. Date  
   09-April-2020  

4. Are you the corresponding author?  
   ✔ Yes  
   No  

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