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

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Erik

2. Surname (Last Name)  
de Loos

3. Date  
   15-February-2021

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

5. Manuscript Title  
   Safety and feasibility of rigid fixation by SternaLock Blu plates during the modified Ravitch procedure: a pilot study

6. Manuscript Identifying Number (if you know it)

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Dr. de Loos 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) | 2. Surname (Last Name) | 3. Date |
|----------------------------|------------------------|---------|
| Paul                      | Andel                  | 15-February-2021 |

4. Are you the corresponding author?  

- Yes  
- No  

Corresponding Author's Name  

- Erik de Loos

5. Manuscript Title  

Safety and feasibility of rigid fixation by SternaLock Blu plates during the modified Ravitch procedure: a pilot study

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- Yes  
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  

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Dr. Andel has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Jean
2. Surname (Last Name) Daemen
3. Date 15-February-2021
4. Are you the corresponding author? ☑ No

5. Manuscript Title
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Dr. Daemen has nothing to disclose.

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Section 1. Identifying Information

| 1. Given Name (First Name) | Jos |
|---------------------------|-----|
| 2. Surname (Last Name)    | Maessen |
| 3. Date                   | 15-February-2021 |
| 4. Are you the corresponding author? | Yes ✔ No |
| 5. Manuscript Title        | Safety and feasibility of rigid fixation by SternaLock Blu plates during the modified Ravitch procedure: a pilot study |
| 6. Manuscript Identifying Number (if you know it) | |

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Dr. Maessen has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
Karel

2. Surname (Last Name)  
Hulsewe

3. Date  
15-February-2021

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

Corresponding Author’s Name  
Erik de Loos

5. Manuscript Title  
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Dr. Hulsewe has nothing to disclose.

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Definitions.

- **Entity**: government agency, foundation, commercial sponsor, academic institution, etc.
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ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name)  
Yvonne

2. Surname (Last Name)  
Vissers

3. Date  
15-February-2021

4. Are you the corresponding author?  
☑ No

Corresponding Author’s Name  
Erik de Loos

5. Manuscript Title  
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Dr. Vissers has nothing to disclose.

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