ICMJE DISCLOSURE FORM

Date: 2022.1.19

Your Name: Shao Gu

Manuscript Title: Application and thinking of minimally invasive transfemoral lumbar interbody fusion in degenerative lumbar diseases

Manuscript number (if known):

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| 11| Stock or stock options                                                        | None     |
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Date: __2022.1.19_________________________  
Your Name: ___ Haifeng Li ________________________________

Manuscript Title: Application and thinking of minimally invasive transforaminal lumbar interbody fusion in degenerative lumbar diseases
Manuscript number (if known): ______________________________________________________________________

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Date: ___ 2022.1.19

Your Name: ___ Daxing Wang

Manuscript Title: Application and thinking of minimally invasive transforaminal lumbar interbody fusion in degenerative lumbar diseases

Manuscript number (if known): __________________________________________________________________________

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Date:____________________________________ 2022.1.19
Your Name:________________________________________ Xuejun Dai

Manuscript Title: Application and thinking of minimally invasive transforaminal lumbar interbody fusion in degenerative lumbar diseases
Manuscript number (if known):__________________________________________________________________

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Date:____________________ 2022.1.19

Your Name:__________________ Chengwei Liu

Manuscript Title: Application and thinking of minimally invasive transforaminal lumbar interbody fusion in degenerative lumbar diseases

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