Date:			10/24/2023			
Your Name:			Martin Heegaard			
Man	nuscript Title:		•	The effect of night-time bracing is similar regardless of curve magnitude in adolescent idiopathic scoliosis: A comprehensive study of 299 patients		
Man	nuscript Number (if k	known):	Click or tap here to enter text.			
content of your manuscript. "Rela affected by the content of the ma			lated" means any relation with for-profit or no anuscript. Disclosure represents a commitmen	e ask you to disclose all relationships/activities/interests listed below that are related to the ated" means any relation with for-profit or not-for-profit third parties whose interests may be nuscript. Disclosure represents a commitment to transparency and does not necessarily t about whether to list a relationship/activity/interest, it is preferable that you do so.		
epid	· · · · · · · · · · · · · · · · · · ·	ension, yo	ou should declare all relationships with manufa	es/interests should be defined broadly. For example, if your manuscript pertains to the u should declare all relationships with manufacturers of antihypertensive medication, even if in the manuscript.		
	em #1 below, report ne for disclosure is th			ithout time limit. For all other items, the time		
			all entities with whom you have this aship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)		
			Time frame: Since the initial planning	of the work		
	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  No time limit for this item.		None	Click the tab key to add additional rows.		
2	Grants or contracts from any entity (if not indicated in item #1 above).		Time frame: past 36 month	S		
3	Royalties or		None			

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None	
6	Payment for expert testimony	[⊠] None	
7	Support for attending meetings and/or travel	[⊠] None	
8	Patents planned, issued or pending	[□] None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	[⊠] None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	[⊠] None	

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)	
11	Stock or stock options	[⊠] None		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	[⊠] None		
13	Other financial or non-financial interests	[⊠] None		
Plea	Please place an "X" next to the following statement to indicate your agreement:			

Date:			10/24/2023			
Your Name:			Niklas Tøndevold			
Manuscript Title:			The effect of night-time bracing is similar regardless of curve magnitude in adolescent idiopathic scoliosis: A comprehensive study of 299 patients			
Mai	nuscript Number (if	known):	Click or tap here to enter text.	_		
In the interest of transparency, we content of your manuscript. "Rela affected by the content of the mar			ated" means any relation with for-profit or no nuscript. Disclosure represents a commitmer	e ask you to disclose all relationships/activities/interests listed below that are related to the ated" means any relation with for-profit or not-for-profit third parties whose interests may be nuscript. Disclosure represents a commitment to transparency and does not necessarily t about whether to list a relationship/activity/interest, it is preferable that you do so.		
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1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing	[⊠] N	one	Click the tab key to add additional rows.		
	charges, etc.) No time limit for this item.					
			Time frame: past 36 month:	S		
2	Grants or contracts from any entity (if not indicated in item #1 above).	[⊠] <b>N</b>	one			
3	Royalties or licenses	N N	one			

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4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None	
6	Payment for expert testimony	[⊠] None	
7	Support for attending meetings and/or travel	[⊠] None	
8	Patents planned, issued or pending	[□] None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	[⊠] None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	[⊠] None	

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11	Stock or stock options	[⊠] None		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	[⊠] None		
13	Other financial or non-financial interests	[⊠] None		
Plea	Please place an "X" next to the following statement to indicate your agreement:			

Date:			10/24/2023		
You	r Name:		Benny Dahl		
Mai	nuscript Title:		The effect of night-time bracing is si adolescent idiopathic scoliosis: A co	imilar regardless of curve magnitude in mprehensive study of 299 patients	
Mai	nuscript Number (if l	known):	Click or tap here to enter text.		
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medical writing, article processing charges, etc.)  No time limit for this item.					
			Time frame: past 36 months	s	
2	Grants or contracts from any entity (if not indicated in item #1 above).	I. J	ments from The Alfred Benzon Foundation	Money to your institution	
3	Royalties or licenses	⊠ No	one		

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4	Consulting fees	None     Non	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	□ None  Stryker	Money paid to you
6	Payment for expert testimony	[⊠] None	
7	Support for attending meetings and/or travel	[⊠] None	
8	Patents planned, issued or pending	□ None	
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11	Stock or stock options	[⊠] None		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	[⊠] None		
13	Other financial or non-financial interests	[⊠] None		
Plea	Please place an "X" next to the following statement to indicate your agreement:			

Date:			10/24/2023		
Your Name:			Thomas B Andersen		
Mar	nuscript Title:		The effect of night-time bracing is si adolescent idiopathic scoliosis: A co	imilar regardless of curve magnitude in imprehensive study of 299 patients	
Mar	nuscript Number (if	known):	Click or tap here to enter text.	_	
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epic		ension, yo		example, if your manuscript pertains to the acturers of antihypertensive medication, even if	
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5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None	
6	Payment for expert testimony	[⊠] None	
7	Support for attending meetings and/or travel	[⊠] None	
8	Patents planned, issued or pending	[□] None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	[⊠] None	
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13	Other financial or non-financial interests	[⊠] None		
Plea	Please place an "X" next to the following statement to indicate your agreement:			

Date:			10/24/2023		
Your Name:			Martin Gehrchen		
Manuscript Title:			The effect of night-time bracing is similar regardless of curve magnitude in adolescent idiopathic scoliosis: A comprehensive study of 299 patients		
Ma	nuscript Number (if k	nown):	Click or tap here to enter text.	_	
In the interest of transparency, we content of your manuscript. "Rela affected by the content of the maindicate a bias. If you are in doubt. The author's relationships/activitic epidemiology of hypertension, you that medication is not mentioned."		ipt. "Relation of the made in double of sectivitions, you entioned	e ask you to disclose all relationships/activities/interests listed below that are related to the ated" means any relation with for-profit or not-for-profit third parties whose interests may be nuscript. Disclosure represents a commitment to transparency and does not necessarily t about whether to list a relationship/activity/interest, it is preferable that you do so.  es/interests should be defined broadly. For example, if your manuscript pertains to the u should declare all relationships with manufacturers of antihypertensive medication, even if in the manuscript.		
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2	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  No time limit for	[\times] N	Time frame: Since the initial planning one  Time frame: past 36 month one	Click the tab key to add additional rows.	

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5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	□ None  Stryker	Money paid to you
6	Payment for expert testimony	[⊠] None	
7	Support for attending meetings and/or travel	[⊠] None	
8	Patents planned, issued or pending	□ None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None	

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11	Stock or stock options	[⊠] None		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	[⊠] None		
13	Other financial or non-financial interests	[⊠] None		
Plea	Please place an "X" next to the following statement to indicate your agreement:			

Date:			10/24/2023		
Your Name:			Søren Ohrt-Nissen		
Manuscript Title:			The effect of night-time bracing is similar regardless of curve magnitude in adolescent idiopathic scoliosis: A comprehensive study of 299 patients		
Maı	nuscript Number (if I	known):	Click or tap here to enter text.		
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