ICMJE DISCLOSURE FORM

Date:	6/12/2023
Your Name:	Miriam C. Faes
Manuscript Title:	Intrathecale fenoltoediening (SPING blok) als palliatieve pijnbehandeling bij oudere, inoperabele patiënten met een proximale femurfractuur
Manuscript Number (if known):	Click or tap here to enter text.

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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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