ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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1. Identifying information.
2. The work under consideration for publication.
   
   This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

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   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)  
   Viktor

2. Surname (Last Name)  
   Hansen

3. Date  
   02-November-2013

4. Are you the corresponding author?  
   ✔ Yes   No

5. Manuscript Title  
   Registries Collecting Level I-IV Data: Institutional and Multicenter Use

6. Manuscript Identifying Number (if you know it)

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Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)? Are there any relevant conflicts of interest?  
   ✔ Yes   No

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   ✔ Yes   No

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**Section 4. Intellectual Property -- Patents & Copyrights**

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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Dr. Hansen 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)  
   Meridith

2. Surname (Last Name)  
   Greene

3. Date  
   04-November-2013

4. Are you the corresponding author?  
   Yes  √  No

Corresponding Author’s Name  
Viktor Hansen

5. Manuscript Title  
   Registries Collecting Level I-IV Data: Institutional and Multicenter Use

6. Manuscript Identifying Number (if you know it)

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Section 1. Identifying Information

1. Given Name (First Name) Henrik
2. Surname (Last Name) Malchau
3. Date 04-November-2013
4. Are you the corresponding author? ☑ Yes
5. Manuscript Title
Registries Collecting Level I-IV Data: Institutional and Multicenter Use

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Section 1. Identifying Information

1. Given Name (First Name)  
   Christopher

2. Surname (Last Name)  
   Barr

3. Date  
   05-November-2013

4. Are you the corresponding author?  
   🅿️ Yes ✅ No

   Corresponding Author’s Name  
   Viktor J. Hansen

5. Manuscript Title  
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1. Given Name (First Name) Audrey
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   Corresponding Author’s Name Viktor Hansen
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ICMJE Form for Disclosure of Potential Conflicts of Interest

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Marc

2. Surname (Last Name)  
   Bragdon

3. Date  
   04-November-2013

4. Are you the corresponding author?  
   ✔ Yes  
   No

5. Manuscript Title  
   Registries Collecting Level I-IV Data: Institutional and Multicenter Use

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?  
Are there any relevant conflicts of interest?  
   ✔ Yes  
   No

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   No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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   No
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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Marc Bragdon has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Huddleston

2. Surname (Last Name)  
   James

3. Date  
   03-November-2013

4. Are you the corresponding author?  
   Yes [ ] No [x]
   Corresponding Author’s Name  
   Viktor Hansen

5. Manuscript Title  
   Registries Collecting Level I-IV Data: Institutional and Multicenter Use

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?  
   Yes [ ] No [x]

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Are there any relevant conflicts of interest?  
   Yes [x] No [ ]

If yes, please fill out the appropriate information below.

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Yes  ☐  No ☑

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Dr. James reports grants and personal fees from Biomet, personal fees from Zimmer, personal fees from Exactech, personal fees from Smith and Nephew, other from Poroosteion, Inc., grants from Robert Wood Johnson Foundation, other from Journal of Arthroplasty, other from AAHKS, outside the submitted work.

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Section 1. Identifying Information

1. Given Name (First Name)  Charles
2. Surname (Last Name)  Bragdon
3. Date  31-October-2013
4. Are you the corresponding author?  Yes  ✔  No
5. Manuscript Title  Registries Collecting Level I-IV Data: Institutional and Multicenter Use
6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest?  ✔ Yes  No

If yes, please fill out the appropriate information below. If you have more than one entity press the “ADD” button to add a row. Excess rows can be removed by pressing the “X” button.

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Zimmer Inc

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