ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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1. Identifying information.

2. The work under consideration for publication.

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**Other:** Anything not covered under the previous three boxes.

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**Royalties:** Funds are coming in to you or your institution due to your patent.
ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 1. Identifying Information**

1. Given Name (First Name)  Donald
2. Surname (Last Name)  Anderson
3. Date  07-June-2015
4. Are you the corresponding author?  Yes  No  ✔
   Corresponding Author’s Name  William Lack
5. Manuscript Title  Motion Predicts Clinical Callus: Construct-Specific Finite Element Analysis of Supracondylar Femur Fractures
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  ✔

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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Are there any relevant conflicts of interest?  Yes  No  ✔

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

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No  ✔
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Jacob
2. Surname (Last Name) Elkins
3. Date 07-June-2015
4. Are you the corresponding author? Yes ☑ No

Corresponding Author’s Name William Lack

5. Manuscript Title
Motion Predicts Clinical Callus: Construct-Specific Finite Element Analysis of Supracondylar Femur Fractures

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest? Yes ☑ 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.

Dr. Elkins reports non-financial support from Zimmer, non-financial support from Synthes, during the conduct of the study;

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name) James
2. Surname (Last Name) Kellam
3. Date 07-June-2015
4. Are you the corresponding author? ☑ Yes
5. Manuscript Title Motion Predicts Clinical Callus: Construct-Specific Finite Element Analysis of Supracondylar Femur Fractures
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Section 1. Identifying Information

1. Given Name (First Name)  
   William

2. Surname (Last Name)  
   Lack

3. Date  
   07-June-2015

4. Are you the corresponding author?  
   Yes ☑  No

5. Manuscript Title  
   Motion Predicts Clinical Callus: Construct-Specific Finite Element Analysis of Supracondylar Femur Fractures

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1. Given Name (First Name)  
   Trevor

2. Surname (Last Name)  
   Lujan

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Are there any relevant conflicts of interest?  
   Yes ☑ No ☐

If yes, please fill out the appropriate information below.

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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?  
☐ Yes  ✔ No

Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

☐ Yes, the following relationships/conditions/circumstances are present (explain below):

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

Dr. Lujan reports non-financial support from Zimmer, non-financial support from Synthes, during the conduct of the study; other from Genesis Fracture Care, outside the submitted work.

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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".

3. Relevant financial activities outside the submitted work.

   This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

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Royalties: Funds are coming in to you or your institution due to your patent.
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Richard

2. Surname (Last Name)  
   Peindl

3. Date  
   07-June-2015

4. Are you the corresponding author?  
   Yes  ✔  No

   Corresponding Author’s Name  
   William Lack

5. Manuscript Title  
   Motion Predicts Clinical Callus: Construct-Specific Finite Element Analysis of Supracondylar Femur Fractures

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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1. Given Name (First Name)  
   J Lawrence  
2. Surname (Last Name)  
   Marsh  
3. Date  
   07-June-2015  
4. Are you the corresponding author?  
   ☑ Yes  
   No  
   Corresponding Author’s Name  
   William Lack  
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☐ No  
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