

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".

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.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

5. Relationships not covered above.

Use this section to report 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.

Definitions.

Entity: government agency, foundation, commercial sponsor, academic institution, etc.

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Personal Fees: Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

Non-Financial Support: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

Other: Anything not covered under the previous three boxes

Pending: The patent has been filed but not issued

Issued: The patent has been issued by the agency

Licensed: The patent has been licensed to an entity, whether earning royalties or not

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) 2. Surname (Last Name)
 Canadian Orthopaedic Trauma Society Ross Leighton, President

3. Date
 15-September-2014

4. Are you the corresponding author? Yes No Corresponding Author's Name
Rudy Reindl

5. Manuscript Title
 Intramedullary versus Extramedullary fixation for unstable intertrochanteric fractures: A prospective randomized control trial.

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

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.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
McGill University	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Participating sites received payments, paid per participant enrolled, via McGill University.
Canadian Orthopaedic Trauma Society	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Grant paid by COTS to McGill University in support of this study

Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were **present during the 36 months prior to publication**.

Are there any relevant conflicts of interest? Yes No

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Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Depuy Synthes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The Canadian Orthopaedic Trauma Society has received financial support from Depuy Synthes for education

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

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Section 6. Disclosure Statement

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Dr. Ross Leighton, President reports other from McGill University, grants from Canadian Orthopaedic Trauma Society, during the conduct of the study; other from Depuy Synthes, outside the submitted work; .

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Elham	2. Surname (Last Name) Rahme	3. Date 11-September-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Rudolf Reindl
5. Manuscript Title Intramedullary versus extramedullary fixation for unstable intertrochanteric fractures: A prospective randomized control trial		
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

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Section 4. Intellectual Property -- Patents & Copyrights

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Nothing to disclose

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Section 1. Identifying Information

1. Given Name (First Name)
Edward

2. Surname (Last Name)
Harvey

3. Date
17-September-2014

4. Are you the corresponding author? Yes No
Corresponding Author's Name
Rudy Reindl

5. Manuscript Title
Intramedullary versus Extramedullary fixation for unstable intertrochanteric fractures: A prospective randomized control trial.

6. Manuscript Identifying Number (if you know it)

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Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Orthopaedic Trauma Association	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Are there any relevant conflicts of interest? Yes No

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Synthes Canada	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	salary support for research assistant

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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Harvey reports grants from Orthopaedic Trauma Association, during the conduct of the study; other from Synthes Canada, outside the submitted work

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Gregory 2. Surname (Last Name) Berry 3. Date 09-September-2014

4. Are you the corresponding author? Yes No Corresponding Author's Name
Rudy Reindl

5. Manuscript Title
Intramedullary versus Extramedullary fixation for unstable intertrochanteric fractures: A prospective randomized control trial.

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.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Orthopaedic Trauma Association	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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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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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Rudolf 2. Surname (Last Name) Reindl 3. Date 08-September-2014

4. Are you the corresponding author? Yes No

5. Manuscript Title
Intramedullary versus extramedullary fixation for unstable intertrochanteric fractures: A prospective randomized control trial

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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Orthopedic Trauma Association	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Synthes DuPuy Canada	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Salary support for research assistant

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Dr. Reindl reports grants from Orthopedic Trauma Association, during the conduct of the study; other from Synthes DuPuy Canada, outside the submitted work; .

Evaluation and Feedback

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