

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

1. Identifying information.

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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.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

| | | |
|---|---|--|
| 1. Given Name (First Name) Tim | 2. Surname (Last Name) Ackland | 3. Date 01-August-2015 |
| 4. Are you the corresponding author? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name Karl Grob |
| 5. Manuscript Title Potential risk to the superior gluteal nerve during the anterior approach to the hip joint: An anatomical study. | | |
| 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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Dr. Ackland 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)

Luis

2. Surname (Last Name)

Filgueira

3. Date

19-January-2015

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Karl Grob

5. Manuscript Title

Potential risk to the superior gluteal nerve during the anterior approach to the hip joint: An anatomical study.

6. Manuscript Identifying Number (if you know it)

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Dr. Filgueira 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)

Karl

2. Surname (Last Name)

Grob

3. Date

03-February-2015

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Potential risk to the superior gluteal nerve during the anterior approach to the hip joint: An anatomical study.

6. Manuscript Identifying Number (if you know it)

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Dr. Grob 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) Markus

2. Surname (Last Name) Kuster

3. Date 15-January-2015

4. Are you the corresponding author? Yes No Corresponding Author's Name Karl Grob

5. Manuscript Title Potential risk to the superior gluteal nerve during the anterior approach to the hip joint: An anatomical study.

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.

| Name of Entity | Grant? | Personal Fees? | Non-Financial Support? | Other? | Comments |
|----------------|--------------------------|-------------------------------------|--------------------------|--------------------------|-------------------------------------|
| Zimmer PtyLtd | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Royalties for Trauma Plating System |
| Zimmer Pty Ltd | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Speaker for Trauma Courses |

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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Dr. Kuster reports personal fees from Zimmer PtyLtd, personal fees from Zimmer Pty Ltd, outside the submitted work; .

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| | | |
|--|---|--|
| 1. Given Name (First Name) Mirjana | 2. Surname (Last Name) Manestar | 3. Date 15-January-2015 |
| 4. Are you the corresponding author? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name Dr. Karl Grob |
| 5. Manuscript Title Potential risk to the superior gluteal nerve during the anterior approach to the hip joint: An anatomical study | | |
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Dr. Manestar has nothing to disclose.

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