

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Chul	2. Surname (Last Name) Kim	3. Date 28-January-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Yong-Min Chun
5. Manuscript Title Clinical outcomes and structural integrity of the anterosuperior rotator cuff tear after arthroscopic repair using two techniques: in continuity versus disrupting the tear margin between the subscapularis and supraspinatus		
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Section 1. Identifying Information

1. Given Name (First Name) Min	2. Surname (Last Name) Jung	3. Date 28-January-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Yong-Min Chun
5. Manuscript Title Clinical outcomes and structural integrity of the anterosuperior rotator cuff tear after arthroscopic repair using two techniques: in continuity versus disrupting the tear margin between the subscapularis and supraspinatus		
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1. Given Name (First Name) Jae-Hoo	2. Surname (Last Name) Lee	3. Date 28-January-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Yong-Min Chun
5. Manuscript Title Clinical outcomes and structural integrity of the anterosuperior rotator cuff tear after arthroscopic repair using two techniques: in continuity versus disrupting the tear margin between the subscapularis and supraspinatus		
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Section 1. Identifying Information

1. Given Name (First Name)
Sung-Jae

2. Surname (Last Name)
Kim

3. Date
28-January-2014

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Yong-Min Chun

5. Manuscript Title
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Yong-Min

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Chun

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