ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Royalties: Funds are coming in to you or your institution due to your patent
Section 1. Identifying Information

1. Given Name (First Name)  
   Sanjeev

2. Surname (Last Name)  
   Kakar

3. Date  
   22-June-2014

4. Are you the corresponding author?  
   [ ] Yes  [ ] No
   Corresponding Author’s Name  
   Eric Strauss, MD

5. Manuscript Title  
   Report From The 2013 AOA North American Traveling Fellowship

6. Manuscript Identifying Number (if you know it)  
   JBJS-D-14-00543R1

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Dr. Kakar 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)  
Daniel

2. Surname (Last Name)  
Stinner

3. Date  
22-June-2014

4. Are you the corresponding author?  
☐ Yes  ✔ No

Corresponding Author’s Name  
Eric Strauss, MD

5. Manuscript Title  
Report From The 2013 AOA North American Traveling Fellowship

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Section 2. The Work Under Consideration for Publication

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Dr. Stinner has nothing to disclose.

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<th>1. Given Name (First Name)</th>
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<tr>
<td>3. Date</td>
<td>22-June-2014</td>
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<td>4. Are you the corresponding author?</td>
<td>☑ No</td>
</tr>
<tr>
<td>Corresponding Author’s Name</td>
<td>Eric Strauss, MD</td>
</tr>
<tr>
<td>5. Manuscript Title</td>
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<tr>
<td>John</td>
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4. Are you the corresponding author?  
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   - No  

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Section 1. Identifying Information

1. Given Name (First Name) Eric
2. Surname (Last Name) Strauss
3. Date 27-May-2014
4. Are you the corresponding author? Yes ✔ No
5. Manuscript Title
Report from the 2013 AOA North American Traveling Fellowship
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