

## 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.

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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) Scott      2. Surname (Last Name) Shawen      3. Date 14-May-2018

4. Are you the corresponding author?     Yes     No      Corresponding Author's Name  
Potter, Benjamin K.

5. Manuscript Title  
Multi-site Evaluation of a custom energy-storing carbon fiber orthosis for lower limb trauma patients with residual disability

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
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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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Dr. Shawen reports grants from Department of Defense, during the conduct of the study; .

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Jason      2. Surname (Last Name) Wilken      3. Date 15-May-2018

4. Are you the corresponding author?     Yes     No      Corresponding Author's Name  
Benjamin Kyle Potter

5. Manuscript Title  
Multi-site Evaluation of a custom energy-storing carbon fiber orthosis for lower limb trauma patients with residual disability

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
DOD	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Grant supported study

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Joseph

2. Surname (Last Name)  
Hsu

3. Date  
15-May-2018

4. Are you the corresponding author?  Yes  No  
Corresponding Author's Name  
Benjamin Potter

5. Manuscript Title  
Multi-site Evaluation of a custom energy-storing carbon fiber orthosis for lower limb trauma patients with residual disability

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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
Smith Nephew	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	speaker bureau



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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) \_\_\_\_\_ Jennifer \_\_\_\_\_

2. Surname (Last Name) \_\_\_\_\_ DeSanto \_\_\_\_\_

3. Date \_\_\_\_\_ 14-May-2018 \_\_\_\_\_

4. Are you the corresponding author?  Yes  No Corresponding Author's Name \_\_\_\_\_ Benjamin K. Potter \_\_\_\_\_

5. Manuscript Title \_\_\_\_\_ Multi-site Evaluation of a custom energy-storing carbon fiber orthosis for lower limb trauma patients with residual disability \_\_\_\_\_

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Ellen

2. Surname (Last Name)  
MacKenzie

3. Date  
14-May-2018

4. Are you the corresponding author?  Yes  No  
Corresponding Author's Name  
Benjamin K. Potter

5. Manuscript Title  
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## ICMJE Form for Disclosure of Potential Conflicts of Interest

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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) Johnny

2. Surname (Last Name) Owens

3. Date 14-May-2018

4. Are you the corresponding author?  Yes  No

Corresponding Author's Name Benjamin K. Potter

5. Manuscript Title Multi-site Evaluation of a custom energy-storing carbon fiber orthosis for lower limb trauma patients with residual disability

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
Department of Defense	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	grant supported study

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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

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Benjamin Kyle

2. Surname (Last Name)  
Potter

3. Date  
14-May-2018

4. Are you the corresponding author?  Yes  No

5. Manuscript Title  
Multi-site Evaluation of a custom energy-storing carbon fiber orthosis for lower limb trauma patients with residual disability

6. Manuscript Identifying Number (if you know it)

### Section 2. The Work Under Consideration for Publication

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Jessica      2. Surname (Last Name) Rivera      3. Date 22-May-2018

4. Are you the corresponding author?     Yes     No      Corresponding Author's Name  
Benjamin K. Potter

5. Manuscript Title  
Multi-site Evaluation of a custom energy-storing carbon fiber orthosis for lower limb trauma patients with residual disability

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

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Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Department of Defense	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The study was supported by the grant.

### Section 3. Relevant financial activities outside the submitted work.

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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

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Robert

2. Surname (Last Name) Sheu

3. Date 14-May-2018

4. Are you the corresponding author?  Yes  No

Corresponding Author's Name Benjamin K. Potter

5. Manuscript Title Multi-site Evaluation of a custom energy-storing carbon fiber orthosis for lower limb trauma patients with residual disability

6. Manuscript Identifying Number (if you know it) \_\_\_\_\_

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Yanjie

2. Surname (Last Name)  
Huang

3. Date  
14-May-2018

4. Are you the corresponding author?  Yes  No  
Corresponding Author's Name  
Benjamin K. Potter

5. Manuscript Title  
Multi-site Evaluation of a custom energy-storing carbon fiber orthosis for lower limb trauma patients with residual disability

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

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

john

2. Surname (Last Name)

fergason

3. Date

14-May-2018

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

Benjamin Potter

5. Manuscript Title

Multi-site Evaluation of a custom energy-storing carbon fiber orthosis for lower limb trauma patients with residual disability

6. Manuscript Identifying Number (if you know it)

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

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Mr . Fergason 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 14-May-2018

4. Are you the corresponding author?  Yes  No

Corresponding Author's Name Benjamin Kyle Potter

5. Manuscript Title Multi-site Evaluation of a custom energy-storing carbon fiber orthosis for lower limb trauma patients with residual disability

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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Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Department of Defense	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Grant supported study

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Are there any relevant conflicts of interest?  Yes  No

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Dr. Stinner reports grants from Department of Defense, during the conduct of the study; .

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Kevin

2. Surname (Last Name)  
Kuhn

3. Date  
06-June-2018

4. Are you the corresponding author?  Yes  No  
Corresponding Author's Name  
Benjamin K. Potter

5. Manuscript Title  
Multi-site Evaluation of a custom energy-storing carbon fiber orthosis for lower limb trauma patients with residual disability

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JBJS-D-18-00213R1

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Department of Defense	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The study was supported by the grant.

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1. Given Name (First Name) Daniel

2. Surname (Last Name) Scharfstein

3. Date 14-May-2018

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

5. Manuscript Title Multi-site Evaluation of a custom energy-storing carbon fiber orthosis for lower limb trauma patients with residual disability

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DOD	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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