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.

2. The work under consideration for publication.

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

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Milton
2. Surname (Last Name) Routt
3. Date 12-June-2019
4. Are you the corresponding author? Yes No ✔
5. Manuscript Title
   Improving the Diagnosis of Ipsilateral Femoral Neck and Shaft Fractures: A New Imaging Protocol
6. Manuscript Identifying Number (if you know it)
   JBJS-D-19-00568

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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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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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Routt has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Stephen

2. Surname (Last Name)  
   Warner

3. Date  
   12-June-2019

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

5. Manuscript Title  
   Improving the Diagnosis of Ipsilateral Femoral Neck and Shaft Fractures: A New Imaging Protocol

6. Manuscript Identifying Number (if you know it)  
   JBJS-D-19-00568

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?  
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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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<td></td>
<td>✔</td>
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Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
   ☐ Yes  ✔ No

Warner
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Section 5. Relationships not covered above

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Dr. Warner reports personal fees from Synthes, outside the submitted work.

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Section 1. Identifying Information

1. Given Name (First Name)  Nathan
2. Surname (Last Name)  Rogers
3. Date  12-June-2019

4. Are you the corresponding author?  ☑ No

Corresponding Author’s Name  Stephen Warner

5. Manuscript Title
Improving the Diagnosis of Ipsilateral Femoral Neck and Shaft Fractures: A New Imaging Protocol

6. Manuscript Identifying Number (if you know it)
JBJS-D-19-00568

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Dr. Rogers has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Timothy
2. Surname (Last Name) Achor
3. Date 12-June-2019
4. Are you the corresponding author? ☑ Yes ☐ No
   Corresponding Author’s Name Stephen Warner
5. Manuscript Title Improving the Diagnosis of Ipsilateral Femoral Neck and Shaft Fractures: A New Imaging Protocol
6. Manuscript Identifying Number (if you know it) JBJS-D-19-00568

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Section 1. Identifying Information

1. Given Name (First Name)  
Andrew

2. Surname (Last Name)  
Choo

3. Date  
12-June-2019

4. Are you the corresponding author?  
☐ Yes  ☑ No  
Corresponding Author’s Name  
Stephen Warner

5. Manuscript Title  
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6. Manuscript Identifying Number (if you know it)  
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Dr. Choo reports personal fees from Smith & Nephew, outside the submitted work.

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3. Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the biomed field, in general, not just in the area of EGFR or lung cancer.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Joshua

2. Surname (Last Name)  
   Gary

3. Date  
   12-June-2019

4. Are you the corresponding author?  
   ☑ Yes  ☐ No  
   Corresponding Author’s Name  
   Stephen Warner

5. Manuscript Title  
   Improving the Diagnosis of Ipsilateral Femoral Neck and Shaft Fractures: A New Imaging Protocol

6. Manuscript Identifying Number (if you know it)  
   JBJS-D-19-00568

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

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.  
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If yes, please fill out the appropriate information below.

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Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 5. Relationships not covered above**

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**Section 6. Disclosure Statement**

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Gary reports personal fees from Smith & Nephew, personal fees from Stryker, other from Summit Medventures, 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) Braden
2. Surname (Last Name) Hartline
3. Date 12-June-2019

4. Are you the corresponding author? ☑ No
   Corresponding Author’s Name
   Stephen Warner

5. Manuscript Title
   Improving the Diagnosis of Ipsilateral Femoral Neck and Shaft Fractures: A New Imaging Protocol

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Dr. Hartline has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
John

2. Surname (Last Name)  
Munz

3. Date  
12-June-2019

4. Are you the corresponding author?  
☐ Yes  ☑ No  
Corresponding Author’s Name  
Stephen Warner

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Dr. Munz reports personal fees from Smith & Nephew, personal fees from Synthes, personal fees from Zimmer, personal fees from Pacira Pharmaceuticals, 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)  Manickam
2. Surname (Last Name)  Kumaravel
3. Date  12 June 2019

4. Are you the corresponding author?  Yes  No
   Corresponding Author’s Name  Stephen Warner

5. Manuscript Title
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