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.

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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**Royalties:** Funds are coming in to you or your institution due to your patent
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Mohammed
2. Surname (Last Name)  Hammad
3. Date  26-September-2019

4. Are you the corresponding author?  
   ✔ No

Corresponding Author’s Name  Javad Parvizi

5. Manuscript Title
Symptomatic Benign Prostatic Hyperplasia: A Risk Factor for Periprosthetic Joint Infection in Male Patients

6. Manuscript Identifying Number (if you know it)

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Mr. Hammad has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Javad

2. Surname (Last Name)  
   Parvizi

3. Date  
   26-September-2019

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

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<th>Name of Entity</th>
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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
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.
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Dr. Parvizi reports other from Eastern Orthopaedic Association, other from Muller Foundation, other from United Healthcare, other from Journal of Bone and Joint Surgery, personal fees from Data Trace, personal fees from Elsevier, personal fees from Jaypee Publishers, personal fees from SLACK Incorporated, personal fees from Wolters Kluwer, other from Parvizi Surgical Innovations, other from Hip Innovation Technology, other from Alphaeon, other from Joint Purification Systems, other from Ceribell, other from Physician Recommended Nutriceuticals, other from PRN-Veterinary, other from MDValuate, other from IntelliJoint, personal fees and other from MicroGenDx, personal fees from Stryker, personal fees from TissueGene, personal fees and other from Corentec, personal fees from Ethicon, personal fees from Tenor, personal fees from KCI, personal fees from Heraeus, personal fees from 3M, personal fees from Flexion, other from Nanoxygenic, outside the submitted work; In addition, Dr. Parvizi has a patent 9,384,328 issued to Javad Parvizi, a patent WO2015164188A1 issued to Javad Parvizi, a patent ADVANCED BIOMATERIALS AND METHODS OF ATTACHING THERAPEUTIC AGENTS THERETO issued to Javad Parvizi, a patent WO2010036930A1 issued to Javad Parvizi, a patent DIAGNOSIS AND TREATMENT OF ARTHROFIBROSIS DISEASES issued to Javad Parvizi, a patent IMPLANTS FOR HIP ARTHROPLASTY AND METHODS OF USE THEREOF pending to Javad Parvizi, and a patent Methods utilizing D-dimer for diagnosis of periprosthetic joint infection pending to Javad Parvizi.

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### Section 1. Identifying Information

1. **Given Name (First Name)**
   - Paul

2. **Surname (Last Name)**
   - Chung

3. **Date**
   - 26-September-2019

4. **Are you the corresponding author?**
   - Yes

5. **Manuscript Title**
   - Symptomatic Benign Prostatic Hyperplasia: A Risk Factor for Periprosthetic Joint Infection in Male Patients

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Are there any relevant conflicts of interest?  
- Yes  
- No

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Dr. Chung 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)  
   Carol

2. Surname (Last Name)  
   Foltz

3. Date  
   26-September-2019

4. Are you the corresponding author?  
   □ Yes  ☑ No  
   Corresponding Author’s Name  
   Javad Parvizi

5. Manuscript Title  
   Symptomatic Benign Prostatic Hyperplasia: A Risk Factor for Periprosthetic Joint Infection in Male Patients

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

## 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?  
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Dr. Foltz has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) 
Leonard

2. Surname (Last Name) 
Gomella

3. Date 
26-September-2019

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

Corresponding Author’s Name
Javad Parvizi

5. Manuscript Title
Symptomatic Benign Prostatic Hyperplasia: A Risk Factor for Periprosthetic Joint Infection in Male Patients

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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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. Gomella has nothing to disclose.

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**Section 1. Identifying Information**

1. Given Name (First Name)  
Camilo

2. Surname (Last Name)  
Restrepo

3. Date  
26-September-2019

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

5. Manuscript Title  
Symptomatic Benign Prostatic Hyperplasia: A Risk Factor for Periprosthetic Joint Infection in Male Patients

6. Manuscript Identifying Number (if you know it)

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Dr. Restrepo has nothing to disclose.

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1. Given Name (First Name)  
   Hamidreza

2. Surname (Last Name)  
   Yazdi

3. Date  
   26-September-2019

4. Are you the corresponding author?  
   Yes

   No

   ✔

   Corresponding Author’s Name  
   Javad Parvizi

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   ✔

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Dr. Yazdi has nothing to disclose.

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