

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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1. Identifying information.

2. The work under consideration for publication.

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4. Intellectual Property.

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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) Samantha

2. Surname (Last Name) Meints

3. Date 21-January-2020

4. Are you the corresponding author? Yes No

Corresponding Author's Name Robert Edwards

5. Manuscript Title Behavioral, Psychological, Neurophysiological, and Neuroanatomic Determinants of Pain

6. Manuscript Identifying Number (if you know it) JBJS-D-20-00082

Section 2. The Work Under Consideration for Publication

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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
NIH-NIAMS	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Paid to JBJS

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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Section 6. Disclosure Statement

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Dr. Meints reports grants from NIH-NIAMS paid to JBJS, during the conduct of the study.

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) Christopher	2. Surname (Last Name) Gilligan	3. Date 21-January-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Robert Edwards
5. Manuscript Title Behavioral, Psychological, Neurophysiological, and Neuroanatomic Determinants of Pain		
6. Manuscript Identifying Number (if you know it) JBJS-D-20-00082		

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Are there any relevant conflicts of interest? Yes No

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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

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Dr. Gilligan has nothing to disclose.

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1. Given Name (First Name) Krisin	2. Surname (Last Name) Schreiber	3. Date 21-January-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Robert Edwards
5. Manuscript Title Behavioral, Psychological, Neurophysiological, and Neuroanatomic Determinants of Pain		
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Dr. Schreiber has nothing to disclose.

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1. Given Name (First Name)
Robert

2. Surname (Last Name)
Edwards

3. Date
21-January-2020

4. Are you the corresponding author? Yes No

5. Manuscript Title
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