

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.

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4. Intellectual Property.

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) Hytham	2. Surname (Last Name) Salem	3. Date 26-October-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Michael Mont
5. Manuscript Title Nontraumatic Osteonecrosis of the Femoral Head: Where do we stand today? A Five-Year Update		
6. Manuscript Identifying Number (if you know it) JBJS-D-19-01271R1		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Section 6. Disclosure Statement

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Dr. Salem has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)
Lynne

2. Surname (Last Name)
Jones

3. Date
26-October-2019

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

5. Manuscript Title
Nontraumatic Osteonecrosis of the Femoral Head: Where do we stand today?
A Five-Year Update

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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
National Institute of Arthritis and Musculoskeletal and Skin Diseases of the U.S. National Institutes of Health	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Dr. Jones reports grants from National Institute of Arthritis and Musculoskeletal and Skin Diseases of the U.S. National Institutes of Health , during the conduct of the study; .

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1. Given Name (First Name) Michael

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3. Date 26-October-2019

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Section 1. Identifying Information

1. Given Name (First Name) Nicolas	2. Surname (Last Name) Piuzzi	3. Date 26-October-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Michael Mont
5. Manuscript Title Nontraumatic Osteonecrosis of the Femoral Head: Where do we stand today? A Five-Year Update		
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Dr. Piuzzi has nothing to disclose.

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