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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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)  
Theodore

2. Surname (Last Name)  
Manson

3. Date  
15-December-2019

4. Are you the corresponding author?  

- Yes  
- No

5. Manuscript Title  
A Calcar Collar is Protective Against Early Torsional/Spiral Periprosthetic Fracture of the Femur: A Paired Cadaveric Biomechanical Analysis.

6. Manuscript Identifying Number (if you know it)  
JBJS-D-19-01125

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- 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.

<table>
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<td>✓</td>
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- 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

**Section 5. Relationships not covered above**

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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**Section 6. Disclosure Statement**

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Dr. Manson reports other from Depuy-Synthes, grants from AO Trauma North America, during the conduct of the study; personal fees from Depuy-Synthes, personal fees from Stryker, other from Globus, outside the submitted work.

**Evaluation and Feedback**

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Section 1. Identifying Information

1. Given Name (First Name)  Timothy
2. Surname (Last Name)  Costales
3. Date  15-December-2019
4. Are you the corresponding author?  Yes  ✔  No
Corresponding Author’s Name  Theodore Manson

5. Manuscript Title
A Calcar Collar is Protective Against Early Torsional/Spiral Periprosthetic Fracture of the Femur: A Paired Cadaveric Biomechanical Analysis.
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Section 1. Identifying Information

1. Given Name (First Name)  Kyung
2. Surname (Last Name)  Koh
3. Date  15-December-2019

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

5. Manuscript Title
A Calcar Collar is Protective Against Early Torsional/Spiral Periprosthetic Fracture of the Femur: A Paired Cadaveric Biomechanical Analysis.

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Dr. Koh has nothing to disclose.

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Zhang
Section 1. Identifying Information

1. Given Name (First Name)  
   Li-Qun

2. Surname (Last Name)  
   Zhang

3. Date  
   15-December-2019

4. Are you the corresponding author?  
   [ ] Yes  
   ✔ No

   Corresponding Author’s Name  
   Theodore Manson

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1. Given Name (First Name) Chunyang
2. Surname (Last Name) Zhang
3. Date 16-December-2019

4. Are you the corresponding author? Yes ☑ No

Corresponding Author’s Name Theodore Manson

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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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Dr. Zhang has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  Aaron
2. Surname (Last Name)  Johnson
3. Date  15-December-2019
4. Are you the corresponding author?  Yes  No  Corresponding Author’s Name  Theodore Manson

5. Manuscript Title
A Calcar Collar is Protective Against Early Torsional/Spiral Periprosthetic Fracture of the Femur: A Paired Cadaveric Biomechanical Analysis.

6. Manuscript Identifying Number (if you know it)  JBJS-D-19-01125

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.

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Dr. Johnson reports other from Depuy-Synthes, grants from AO Trauma North America, during the conduct of the study; grants from AO Trauma / Orthopaedic Trauma Association, outside the submitted work.

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Section 1. Identifying Information

1. Given Name (First Name)  
Shivam

2. Surname (Last Name)  
Desai

3. Date  
15-December-2019

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

Corresponding Author’s Name  
Theodore T Manson

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Dr. Desai reports other from Depuy-Synthes, grants from AO Trauma North America, during the conduct of the study.

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Robert

2. Surname (Last Name)  
   O'Toole

3. Date  
   16-December-2019

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

   Corresponding Author’s Name  
   Theodore T. Manson, MD

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