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.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   John

2. Surname (Last Name)  
   Caminis

3. Date  
   27-June-2019

4. Are you the corresponding author?  
   Yes ☒  No

   Corresponding Author’s Name
   Mohit Bhandari

5. Manuscript Title  
   A Randomized Study of Romosozumab in Skeletally Mature Adults With a Fresh Unilateral Tibial Diaphyseal Fracture

6. Manuscript Identifying Number (if you know it)  
   JBJS-D-19-01008

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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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Section 6. Disclosure Statement

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Dr. Caminis reports personal fees from UCB Pharma, outside the submitted work.

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**Section 1. Identifying Information**

1. **Given Name (First Name)**
   Emil

2. **Surname (Last Name)**
   Schemitsch

3. **Date**
   27-June-2019

4. **Are you the corresponding author?**
   [ ] Yes  [x] No
   **Corresponding Author's Name**
   Mohit Bhandari

5. **Manuscript Title**
   A Randomized Study of Romosozumab in Skeletally Mature Adults With a Fresh Unilateral Tibial Diaphyseal Fracture

6. **Manuscript Identifying Number (if you know it)**
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Are there any relevant conflicts of interest?  [x] 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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- [ ] Yes  
- [x] No

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Dr. Schemitsch reports personal fees from Amgen, during the conduct of the study; personal fees from Stryker, personal fees from Smith&Nephew, personal fees from Amgen, personal fees from Acumed, personal fees from ITS, personal fees from Sanofi, grants from Biocomposites, outside the submitted work.
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Section 1. Identifying Information

1. Given Name (First Name)  
Mohit  

2. Surname (Last Name)  
Bhandari  

3. Date  
27-June-2019  

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

5. Manuscript Title  
A Randomized Study of Romosozumab in Skeletally Mature Adults With a Fresh Unilateral Tibial Diaphyseal Fracture  

6. Manuscript Identifying Number (if you know it)  
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Are there any relevant conflicts of interest?  
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Dr. Bhandari reports personal fees from AgNovos Healthcare, personal fees and non-financial support from Sanofi Aventis, personal fees from Stryker, personal fees from Pendopharm, grants from DJ Orthopedics, grants from Acumed, outside the submitted work; .

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1. Given Name (First Name)  Arkadi
2. Surname (Last Name)  Chines
3. Date  27-June-2019
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Dr. Chines reports personal fees from Amgen Inc., other from Amgen Inc., 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)  Nadia
2. Surname (Last Name)  Daizadeh
3. Date  27-June-2019
4. Are you the corresponding author?  Yes  No
   Corresponding Author’s Name  Mohit Bhandari
5. Manuscript Title
   A Randomized Study of Romosozumab in Skeletally Mature Adults With a Fresh Unilateral Tibial Diaphyseal Fracture
6. Manuscript Identifying Number (if you know it)
   JBJS-D-19-01008

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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
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?  Yes  No
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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Dr. Daizadeh reports personal fees from Amgen Inc., other from Amgen Inc., 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)  
Ricardo

2. Surname (Last Name)  
Dent

3. Date  
27-June-2019

4. Are you the corresponding author?  
☑ No

Corresponding Author’s Name  
Mohit Bhandari

5. Manuscript Title  
A Randomized Study of Romosozumab in Skeletally Mature Adults With a Fresh Unilateral Tibial Diaphyseal Fracture

6. Manuscript Identifying Number (if you know it)  
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Are there any relevant conflicts of interest?  
☑ No

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☑ No
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
Ogo  
2. Surname (Last Name)  
Egbuna  
3. Date  
27-June-2019  

4. Are you the corresponding author?  
 Yes  ✔  No  
Corresponding Author’s Name  
Mohit Bhandari  

5. Manuscript Title  
A Randomized Study of Romosozumab in Skeletally Mature Adults With a Fresh Unilateral Tibial Diaphyseal Fracture  

6. Manuscript Identifying Number (if you know it)  
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Karachalios 1
ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 1. Identifying Information**

1. Given Name (First Name)  
Theofilos
2. Surname (Last Name)  
Karachalios
3. Date  
27-June-2019
4. Are you the corresponding author?  
[ ] Yes  ✔ No  
Corresponding Author’s Name  
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Dr. Karachalios reports grants from Microport, grants from Smith & Nephew, outside the submitted work.

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1. Given Name (First Name)  Theodore
2. Surname (Last Name)  Miclau
3. Date  27-June-2019
4. Are you the corresponding author?  Yes  No
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<td>Advisory Board - Clinical Studies Romosozumab Hip Fracture Study</td>
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<tr>
<th>Name of Entity</th>
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<th>Non-Financial Support?</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

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ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 1. Identifying Information**

1. Given Name (First Name)  
   Rudolf

2. Surname (Last Name)  
   Poolman

3. Date  
   27-June-2019

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

   Corresponding Author’s Name  
   Mohit Bhandari

5. Manuscript Title  
   A Randomized Study of Romosozumab in Skeletally Mature Adults With a Fresh Unilateral Tibial Diaphyseal Fracture

6. Manuscript Identifying Number (if you know it)  
   JBJS-D-19-01008

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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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Name of Entity | Grant | Personal Fees | Non-Financial Support | Other | Comments
--- | --- | --- | --- | --- | ---
Tornier | ✔ | | | | Tornier
Stryker | ✔ | | | | Hip study
NVA | ✔ | | | | Shoulder study
Clementia | ✔ | | | | HME trial
Van Rens Fund | ✔ | | | | Hip trail
Nuvasive | ✔ | | | | Spine trial

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2. Surname (Last Name) Sancheti
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Dr. Sancheti has nothing to disclose.

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