ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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Section 1. Identifying Information

1. Given Name (First Name)  Neil  
2. Surname (Last Name)  Schep  
3. Date  11-February-2020  
4. Are you the corresponding author?  Yes  No  
5. Manuscript Title  
Volar locked plating versus closed reduction and casting for acute, displaced distal radius fractures in the elderly: A systematic review and meta-analysis of randomized controlled trials  
6. Manuscript Identifying Number (if you know it)  JBJS-D-19-01442  

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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.)?  
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Dr. Schep has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Angela

2. Surname (Last Name)  
   Presson

3. Date  
   10-February-2020

4. Are you the corresponding author?  
   Yes  ✔  No

Corresponding Author's Name  
Nikolas Kazmers, MD MSE

5. Manuscript Title  
   Volar locked plating versus closed reduction and casting for acute, displaced distal radius fractures in the elderly: A systematic review and meta-analysis of randomized controlled trials

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<th>1. Given Name (First Name)</th>
<th>Andrew</th>
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<tbody>
<tr>
<td>2. Surname (Last Name)</td>
<td>Stephens</td>
</tr>
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4. Are you the corresponding author? [ ] Yes [x] No

Corresponding Author’s Name
Nikolas Kazmers, MD MSE

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   Chong
2. Surname (Last Name)
   Zhang
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Dr. Sirniö has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Marjolein

2. Surname (Last Name)  
   Mulders

3. Date  
   11-February-2020

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

   Corresponding Author’s Name  
   Nikolas Kazmers, MD MSE

5. Manuscript Title  
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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Mary  
2. Surname (Last Name)  
   McFarland  
3. Date  
   11-February-2020  

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

5. Manuscript Title  
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Ms. McFarland has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name)  
   Nikolas

2. Surname (Last Name)  
   Kazmers

3. Date  
   10-February-2020

4. Are you the corresponding author?  
   ☑ Yes  
   No

Corresponding Author’s Name  
Nikolas Kazmers, MD MSE

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