ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Ajay

2. Surname (Last Name)  
   Premkumar

3. Date  
   22-May-2020

4. Are you the corresponding author?  
   ☐ Yes  ☑ No  
   Corresponding Author’s Name  
   Jordan A Gruskay

5. Manuscript Title  
   Universal Testing for COVID-19 in "Essential" Orthopedic Surgery Reveals a High Percentage of Asymptomatic Infections

6. Manuscript Identifying Number (if you know it)  
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Dr. Premkumar has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Christopher

2. Surname (Last Name)  
   DeFrancesco

3. Date  
   21-May-2020

4. Are you the corresponding author?  
   ☑ No
   Corresponding Author’s Name  
   Jordan A Gruskay

5. Manuscript Title  
   Universal Testing for COVID-19 in "Essential" Orthopedic Surgery Reveals a High Percentage of Asymptomatic Infections

6. Manuscript Identifying Number (if you know it)  
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Dr. DeFrancesco has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)        2. Surname (Last Name)        3. Date
Aleksey                        Dvorzhinskiy                  22-May-2020

4. Are you the corresponding author?                 Yes  ☑  No

Corresponding Author’s Name
Jordan A Gruskay

5. Manuscript Title
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Dr. Dvorzhinskiy has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
Drake

2. Surname (Last Name)  
LeBrun

3. Date  
21-May-2020

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

Corresponding Author’s Name  
Jordan A Gruskay

5. Manuscript Title  
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Dr. LeBrun has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Gregory

2. Surname (Last Name)  
   Ghahramani

3. Date  
   22-May-2020

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   [ ] Yes  [✓] No
   Corresponding Author's Name  
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Gregory C. Ghahramani has nothing to disclose

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Jordan

2. Surname (Last Name)  
   Gruskay

3. Date  
   22-May-2020

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

5. Manuscript Title  
   Universal Testing for COVID-19 in "Essential" Orthopedic Surgery Reveals a High Percentage of Asymptomatic Infections

6. Manuscript Identifying Number (if you know it)  
   JBJS-D-20-01053

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Dr. Gruskay has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Christopher

2. Surname (Last Name)  
   Mendias

3. Date  
   27-April-2020

4. Are you the corresponding author?  
   Yes  [✓] No  
   Corresponding Author’s Name  
   Jordan Gruskay

5. Manuscript Title  
   Universal Testing for COVID-19 in “Essential” Orthopedic Surgery Reveals a High Percentage of Asymptomatic Infections

6. Manuscript Identifying Number (if you know it)  
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<tr>
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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. Mendias reports personal fees from GLG Life Sciences Consulting, personal fees from GlaxoSmithKline, grants from Mark Cuban Foundation, grants from Orthopaedic Research and Education Foundation, personal fees from Associate Editor, Translational Sports Medicine, other from Editorial Board, Journal of Orthopaedic Research and Journal of Applied Physiology, grants from NIH, 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)  
   William

2. Surname (Last Name)  
   Ricci

3. Date  
   23-May-2020

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

   Corresponding Author’s Name
   Jordan A Gruskay

5. Manuscript Title
   Universal Testing for COVID-19 in "Essential" Orthopedic Surgery Reveals a High Percentage of Asymptomatic Infections

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Dr. Ricci reports other from CableFix LLC, other from McGinley Orthopaedic Innovations, other from Primo MC LLC, other from HS2, personal fees from MicroPort, personal fees from Smith & Nephew, personal fees from Wolters-Kluwer, other from OsteoCentric, grants from AONA, grants from COTA, outside the submitted work; .
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**Section 1. Identifying Information**

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

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

3. **Date**  
   21-May-2020

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

   **Corresponding Author’s Name**  
   Jordan A Gruskay

5. **Manuscript Title**  
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