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)  
   Robert

2. Surname (Last Name)  
   Trousdale

3. Date  
   17-February-2020

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

   Corresponding Author’s Name  
   Matthew P Abdel MD

5. Manuscript Title  
   Cementing Liners Into Well-Fixed Acetabular Components: Should We Be Concerned About Mid- to Long-Term Fixation?

6. Manuscript Identifying Number (if you know it)  
   JBJS-D-19-01441

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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?  
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   ☐ No
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Dr. Trousdale reports personal fees from DePuy, outside the submitted work; .

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Section 1. Identifying Information

1. Given Name (First Name)  
   David

2. Surname (Last Name)  
   Lewallen

3. Date  
   17-February-2020

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

   Corresponding Author’s Name  
   Matthew P Abdel MD

5. Manuscript Title  
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Are there any relevant conflicts of interest?  
   Yes ☐  No ☑

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   Yes ☑  No ☐

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Dr. Lewallen reports personal fees from Zimmer Biomet, personal fees from AJRR, personal fees from Zimmer Biomet, personal fees from Stryker, other from Ketai Medical Devices, other from Accutite, personal fees from Zimmer Biomet, grants from Corin, outside the submitted work.

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1. Given Name (First Name)  Matthew
2. Surname (Last Name)  Tetreault
3. Date  17-February-2020

4. Are you the corresponding author?  Yes  No
Corresponding Author’s Name  Matthew P Abdel MD

5. Manuscript Title
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Section 1. Identifying Information

1. Given Name (First Name)  Ailen
2. Surname (Last Name)  Hanssen
3. Date  17-February-2020

4. Are you the corresponding author? □ Yes  ✔ No
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   Matthew P Abdel MD

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Section 1. Identifying Information

1. Given Name (First Name)  
Daniel

2. Surname (Last Name)  
Berry

3. Date  
25-February-2020

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

Corresponding Author’s Name  
Matthew P Abdel MD

5. Manuscript Title  
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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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<th>Name of Entity</th>
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<th>Non-Financial Support?</th>
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<td>President-Elect</td>
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<tr>
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<td>☐</td>
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<td>☑</td>
<td></td>
<td>Member, Steering Committee</td>
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ICMJE Form for Disclosure of Potential Conflicts of Interest

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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
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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<td>Related to hip and knee implants</td>
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</tbody>
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**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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Dr. Daniel reports personal fees from Journal of Bone and Joint Surgery, personal fees from DePuy, personal fees from Wolter Kluwer, personal fees from Elsevier, other from International Hip Society, other from International Society of Arthroplasty Registries, other from Bodycad, outside the submitted work; in addition, Dr. Daniel has a patent DePuy issued.
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1. Identifying information.

2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking “No” means that you did the work without receiving any financial support from any third party — that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check “Yes”.

3. Relevant financial activities outside the submitted work.

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

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Royalties: Funds are coming in to you or your institution due to your patent
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Matthew

2. Surname (Last Name)  
   Abdel

3. Date  
   17-February-2020

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

5. Manuscript Title  
   Cementing Liners Into Well-Fixed Acetabular Components: Should We Be Concerned About Mid- to Long-Term Fixation?

6. Manuscript Identifying Number (if you know it)  
   JBJS-D-19-01441

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ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 1. Identifying Information**

1. Given Name (First Name)  
   Nicholas

2. Surname (Last Name)  
   Bedard

3. Date  
   17-February-2020

4. Are you the corresponding author?  
   [ ] Yes  
   [x] No  
   Corresponding Author’s Name  
   Matthew P Abdel MD

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Dr. Bedard has nothing to disclose.

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