ICMJE Form for Disclosure of Potential Conflicts of Interest

**Instructions**

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   **The work under consideration for publication.**

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3. **Intellectual Property.**

   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)  Michael
2. Surname (Last Name)  Bosse
3. Date  28-October-2020
4. Are you the corresponding author?  ✔ Yes  No

5. Manuscript Title
***Blinded by JBJS***: Comparison of Limb Salvage vs. Transtibial Amputation (**Blinded by JBJS**)

6. Manuscript Identifying Number (if you know it)
JBJS-D-20-01320

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?  No

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  ✔ No
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Dr. Bosse has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)  
   Eben

2. Surname (Last Name)  
   Carroll

3. Date  
   02-November-2020

4. Are you the corresponding author?  
   Yes  ✔  No

   Corresponding Author’s Name  
   Michael Bosse, MD

5. Manuscript Title  
   ***Blinded by JBJS***: Comparison of Limb Salvage vs. Transtibial Amputation (***Blinded by JBJS***)

6. Manuscript Identifying Number (if you know it)  
   JBJS-D-20-01320

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Are there any relevant conflicts of interest?  
   Yes  ✔  No

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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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Dr. Carroll reports personal fees from DePuy Synthes, personal fees from Globus, from null, outside the submitted work.

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Section 1. Identifying Information

1. Given Name (First Name) Reza
2. Surname (Last Name) Firoozabadi
3. Date 30-October-2020
4. Are you the corresponding author? ☑ No
5. Manuscript Title
   ***Blinded by JBJS***: Comparison of Limb Salvage vs. Transtibial Amputation (***Blinded by JBJS***)
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Dr. Firoozabadi reports grants from DoD, during the conduct of the study.

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## Section 1. Identifying Information

1. **Given Name (First Name)**
   - Joshua

2. **Surname (Last Name)**
   - Gary

3. **Date**
   - 01-November-2020

4. **Are you the corresponding author?**
   - Yes

   **Corresponding Author’s Name**
   - Michael Bosse, MD

5. **Manuscript Title**
   - ***Blinded by JBJS***: Comparison of Limb Salvage vs. Transtibial Amputation (***Blinded by JBJS***)

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1. Given Name (First Name) Wade
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3. Date 05-November-2020
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes ☐ No ✔
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Dr. Gordon reports grants from DoD, during the conduct of the study.

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# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Section 1. Identifying Information

1. **Given Name (First Name)**
   - Clifford

2. **Surname (Last Name)**
   - Jones

3. **Date**
   - 31-October-2020

4. **Are you the corresponding author?**
   - Yes

5. **Manuscript Title**
   - ***Blinded by JBJS***: Comparison of Limb Salvage vs. Transtibial Amputation (**Blinded by JBJS**)

6. **Manuscript Identifying Number (if you know it)**
   - JBJS-D-20-01320

## Section 2. The Work Under Consideration for Publication

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Section 1. Identifying Information

1. Given Name (First Name)  
Jason  

2. Surname (Last Name)  
Luly  

3. Date  
02-November-2020  

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

Corresponding Author’s Name  
Michael Bosse

5. Manuscript Title  
***Blinded by JBJS***: Comparison of Limb Salvage vs. Transtibial Amputation (***Blinded by JBJS***)

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Ellen
2. Surname (Last Name)  MacKenzie
3. Date  02-November-2020

4. Are you the corresponding author?  Yes  ☑ No

Corresponding Author’s Name  Michael Bosse

5. Manuscript Title
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Morshed
ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 1. Identifying Information**

1. Given Name (First Name)  
   Saam  
2. Surname (Last Name)  
   Morshed  
3. Date  
   30-October-2020  
4. Are you the corresponding author?  
   Yes  
   ✔  
   No  
   ✔  
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**Non-Financial Support:** Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

**Other:** Anything not covered under the previous three boxes

**Pending:** The patent has been filed but not issued

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**Licensed:** The patent has been licensed to an entity, whether earning royalties or not

**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)  Lisa
2. Surname (Last Name)  Reider
3. Date  01-November-2020
4. Are you the corresponding author?  Yes  No  ✔
   Corresponding Author's Name  Michael Bosse
5. Manuscript Title
   ***Blinded by JBJS***: Comparison of Limb Salvage vs. Transtibial Amputation (***Blinded by JBJS***)
6. Manuscript Identifying Number (if you know it)
   JBJS-D-20-01320

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

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Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the “Add +” box. You should report relationships that were present during the 36 months prior to publication.

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

Reider
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☐ No other relationships/conditions/circumstances that present a potential conflict of interest

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Section 6. Disclosure Statement

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Dr. Reider reports grants from Department of Defense, during the conduct of the study;

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1. Identifying information.

2. The work under consideration for publication.

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Daniel

2. Surname (Last Name)  
   Scharfstein

3. Date  
   03-November-2020

4. Are you the corresponding author?  
   ☑ No
   
   Corresponding Author’s Name  
   Michael Bosse

5. Manuscript Title  
   ***Blinded by JBJS***: Comparison of Limb Salvage vs. Transtibial Amputation (***Blinded by JBJS***)

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   ☐ No

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Scharfstein
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Dr. Scharfstein reports grants from DoD, during the conduct of the study; .

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   David

2. Surname (Last Name)  
   Teague

3. Date  
   30-October-2020

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

5. Manuscript Title  
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