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.

2. The work under consideration for publication.

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**Royalties:** Funds are coming in to you or your institution due to your patent
**Section 1. Identifying Information**

1. Given Name (First Name)  
   Andrew

2. Surname (Last Name)  
   Stephens

3. Date  
   04-December-2020

4. Are you the corresponding author?  
   Yes ☒ No

   Corresponding Author’s Name  
   Nikolas Kazmers, MD MSE

5. Manuscript Title  
   Optimizing costs and outcomes for carpal tunnel release surgery: A cost-effectiveness analysis from societal and hospital perspectives

6. Manuscript Identifying Number (if you know it)  
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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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Section 1. Identifying Information

1. Given Name (First Name)  
   Miranda

2. Surname (Last Name)  
   Rogers

3. Date  
   04-December-2020

4. Are you the corresponding author?  
   ✔ Yes  
   No

5. Manuscript Title  
   Optimizing costs and outcomes for carpal tunnel release surgery: A cost-effectiveness analysis from societal and hospital perspectives

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   ✔ Yes  
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1. Given Name (First Name)  
   Minkyoung

2. Surname (Last Name)  
   Yoo

3. Date  
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4. Are you the corresponding author?  
   Yes ☑  No

   Corresponding Author’s Name  
   Nikolas Kazmers, MD MSE

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Section 1. Identifying Information

1. Given Name (First Name)
   Nikolas

2. Surname (Last Name)
   Kazmers

3. Date
   04-December-2020

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

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Section 1. Identifying Information

1. Given Name (First Name)  Richard
2. Surname (Last Name)  Nelson
3. Date  04-December-2020
4. Are you the corresponding author?  Yes  ✔  No

5. Manuscript Title
Optimizing costs and outcomes for carpal tunnel release surgery: A cost-effectiveness analysis from societal and hospital perspectives

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Section 3. Relevant financial activities outside the submitted work.

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Dr. Yoo reports grants from NIH UL1TR002538, during the conduct of the study; .

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