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.

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Section 1. Identifying Information

1. Given Name (First Name)  Hany
2. Surname (Last Name)  Bedair
3. Date  06-January-2021
4. Are you the corresponding author?  Yes  ✔  No

5. Manuscript Title
Shared decision making associated with better health outcomes for patients with knee osteoarthritis but not hip osteoarthritis (DECIDE-OA Study)

6. Manuscript Identifying Number (if you know it)

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

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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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. Bedair reports grants from PCORI, during the conduct of the study; personal fees from Smith & Nephew, personal fees from Exactech, 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) Janet
2. Surname (Last Name) Dorrwachter
3. Date 04-December-2020
4. Are you the corresponding author? ☑ No
   Corresponding Author's Name Karen Sepucha
5. Manuscript Title
   Shared decision making is associated with better health outcomes for patients with knee osteoarthritis but not hip osteoarthritis (DECIDE-OA Study)
6. Manuscript Identifying Number (if you know it)

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.)? ☑ Yes ☐ No

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Dr. Dorrwachter reports grants from PCORI, during the conduct of the study.

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Section 1. Identifying Information

1. Given Name (First Name)  
Maureen

2. Surname (Last Name)  
Dwyer

3. Date  
13-December-2020

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

Corresponding Author’s Name  
Karen Sepucha

5. Manuscript Title  
Shared decision making is associated with better health outcomes for patients with knee osteoarthritis but not hip osteoarthritis (DECIDE-OA Study)

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name)  
   Karen

2. Surname (Last Name)  
   Sepucha

3. Date  
   06-January-2021

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

5. Manuscript Title  
   Shared decision making associated with better health outcomes for patients with knee osteoarthritis but not hip osteoarthritis: Results from a prospective multi-site study (DECIDE-OA Study)

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Massachusetts General Hospital is the measure steward for the National Quality Forum performance measure 2968 Informed, Patient-Centered Hip and Knee Surgery that was used in the study.

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## Section 1. Identifying Information

1. **Given Name (First Name)**: Carl  
2. **Surname (Last Name)**: Talmo  
3. **Date**: 28-December-2020  
4. Are you the corresponding author?  
   - [ ] Yes  
   - [x] No  
5. **Manuscript Title**: Shared decision making associated with better health outcomes for patients with hip osteoarthritis: Results from a multi-site study (DECIDE-OA Study)  
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<td>Patient-Centered Outcomes Research Institute (PCORI).</td>
<td>[x] Grant</td>
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<td>Financial support for this study was provided entirely by a grant (Award CDR#1503-28799) from the Patient-Centered Outcomes Research Institute (PCORI). The funding agreement ensured the authors’ independence in designing the study, interpreting the data, writing, and publishing the report.</td>
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Are there any relevant conflicts of interest?  
- [ ] Yes  
- [x] No
Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
☐ Yes  ✔ No

Section 5. Relationships not covered above

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Dr. Talmo reports grants from Patient-Centered Outcomes Research Institute (PCORI). , 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)**
   - Ha

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

3. **Date**
   - 22-December-2020

4. **Are you the corresponding author?**
   - Yes ☑ No

5. **Manuscript Title**
   - Shared decision making is associated with better health outcomes for patients with knee osteoarthritis but not hip osteoarthritis (DECIDE-OA Study)

6. **Manuscript Identifying Number (if you know it)**

## 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

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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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Yuchiao

2. Surname (Last Name)  
   Chang

3. Date  
   07-January-2021

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

Corresponding Author’s Name  
Karen R. Sepucha, PhD

5. Manuscript Title  
   Shared decision making associated with better health outcomes for patients with knee osteoarthritis but not hip osteoarthritis: Results from a multi-site study (DECIDE-OA Study)

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest?  
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Section 1. Identifying Information

1. Given Name (First Name)  Andrew
2. Surname (Last Name)  Freiberg
3. Date  14-December-2020
4. Are you the corresponding author?  Yes  No

**Corresponding Author’s Name**  Karen Sepucha, PhD

5. Manuscript Title
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