

ICMJJE DISCLOSURE FORM

Date: 11/11/21

Your Name: Pedro Beredjiklian

Manuscript Title: ICM-VTE Hand Group Hand Recommendations from the ICM -VTE

Manuscript number (if known): _____

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the current manuscript only.

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In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

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Time frame: Since the initial planning of the work			
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6	Payment for expert testimony	X___None	
7	Support for attending meetings and/or travel	__X__None	
8	Patents planned, issued or pending	___X_None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	__X__None	
10	Leadership or fiduciary role	___None	Dimension Orthotics LLC

	in other board, society, committee or advocacy group, paid or unpaid		
11	Stock or stock options	<input type="checkbox"/> None	Dimension Orthotics LLC
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13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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I certify that I have answered every question and have not altered the wording of any of the questions on this form.