

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
stephen

2. Surname (Last Name)
burnett

3. Date
24-March-2015

4. Are you the corresponding author? Yes No

5. Manuscript Title
Pyoderma Gangrenosum in Revision Total Hip Arthroplasty Clinical and Histopathological Findings with a Seven-Year Follow-Up: A Case Report

6. Manuscript Identifying Number (if you know it)

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Dr. burnett has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

james

2. Surname (Last Name)

mathers

3. Date

24-March-2015

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

stephen burnett

5. Manuscript Title

Pyoderma Gangrenosum in Revision Total Hip Arthroplasty Clinical and Histopathological Findings with a Seven-Year Follow-Up: A Case Report

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Dr. mathers has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) rajesh	2. Surname (Last Name) nair	3. Date 24-March-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Stephen Burnett
5. Manuscript Title Pyoderma Gangrenosum in Revision Total Hip Arthroplasty Clinical and Histopathological Findings with a Seven-Year Follow-Up: A Case Report		
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1. Given Name (First Name)
douglas

2. Surname (Last Name)
sawyer

3. Date
24-March-2015

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Yes No

Corresponding Author's Name
stephen burnett

5. Manuscript Title
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ariella

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zbar

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stephen burnett

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