

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Jeffrey	2. Surname (Last Name) Friedrich	3. Date 04-November-2016
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Claudia Christman-Skeiler
5. Manuscript Title Posterolateral approach to the scapula for evacuation of a subscapular abscess: a case report		
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.)?

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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Friedrich has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Claudia

2. Surname (Last Name)
Christman-Skieller

3. Date
15-November-2016

4. Are you the corresponding author? Yes No

5. Manuscript Title
Posterolateral approach to the scapula for evacuation of a subscapular abscess: a case report

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Dr. Christman-Skieller has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Douglas
2. Surname (Last Name)
Smith
3. Date
11-November-2016
4. Are you the corresponding author? Yes No
5. Manuscript Title
Posterolateral approach to the scapula for evacuation of a subscapular abscess: a case report
6. Manuscript Identifying Number (if you know it)

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Dr. Smith has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Rebecca	2. Surname (Last Name) Plevin	3. Date 07-November-2016
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Claudia Christman-Skieller
5. Manuscript Title Posterolateral approach to the scapula for evacuation of a subscapular abscess: a case report		
6. Manuscript Identifying Number (if you know it)		

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Dr. Plevin has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Lisa

2. Surname (Last Name)

McIntyre

3. Date

03-November-2016

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

Claudia Christman-Skieller

5. Manuscript Title

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