

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
John

2. Surname (Last Name)
Carroll

3. Date
12-May-2019

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Ky Kobayashi

5. Manuscript Title
Interposition arthroplasty of elbow after proximal ulna reconstruction with Masquelet technique: a case report

6. Manuscript Identifying Number (if you know it)
CC-D-19-00084

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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Are there any relevant conflicts of interest? Yes No

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Dr. Carroll has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Chance	2. Surname (Last Name) Henderson	3. Date 12-May-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Kobayashi
5. Manuscript Title Interposition arthroplasty of elbow after proximal ulna reconstruction with Masquelet technique: a case report		
6. Manuscript Identifying Number (if you know it) CC-D-19-00084		

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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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Henderson has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Ky

2. Surname (Last Name)
Kobayashi

3. Date
12-May-2019

4. Are you the corresponding author? Yes No

5. Manuscript Title
Interposition arthroplasty of elbow after proximal ulna reconstruction with Masquelet technique: a case report

6. Manuscript Identifying Number (if you know it)
CC-D-19-00084

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Conmed	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consultant

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. Kobayashi reports personal fees from Conmed, outside the submitted work; .

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Section 1. Identifying Information

1. Given Name (First Name) Karl	2. Surname (Last Name) Larsen	3. Date 12-May-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Ky Kobayashi
5. Manuscript Title Interposition arthroplasty of elbow after proximal ulna reconstruction with Masquelet technique: a case report		
6. Manuscript Identifying Number (if you know it) CC-D-19-00084		

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Dr. Larsen has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Jeff

2. Surname (Last Name)
Watson

3. Date
12-May-2019

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Kobayashi

5. Manuscript Title

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