

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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#### 1. Identifying information.

#### 2. The work under consideration for publication.

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#### 4. Intellectual Property.

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

#### 5. Relationships not covered above.

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#### Definitions.

**Entity:** government agency, foundation, commercial sponsor, academic institution, etc.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

|  |   |   |
|--|---|---|
| 1. Given Name (First Name)<br>Benjamin   | 2. Surname (Last Name)<br>Miller                                    | 3. Date<br>18-December-2019                 |
| 4. Are you the corresponding author?   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name<br>Malynda Wynn |
| 5. Manuscript Title<br>Nonoperative Treatment of a Pathologic Proximal Tibia Fracture in the Setting of Prior Total Knee Arthroplasty: A Case Report |   |   |
| 6. Manuscript Identifying Number (if you know it)<br>CC-D-19-00517R2   |   |   |

### 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

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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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### Section 6. Disclosure Statement

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Dr. Miller has nothing to disclose.

### Evaluation and Feedback

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### Section 1. Identifying Information

|   |   |   |
|---|---|---|
| 1. Given Name (First Name)<br>Christopher   | 2. Surname (Last Name)<br>Carender                                  | 3. Date<br>19-September-2019                    |
| 4. Are you the corresponding author?  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name<br>Timothy S. Brown |
| 5. Manuscript Title<br>Nonoperative Treatment of a Pathologic Periprosthetic Tibia Fracture in the Setting of Prior Total Knee Arthroplasty |   |   |
| 6. Manuscript Identifying Number (if you know it)   |   |   |

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Dr. Carender has nothing to disclose.

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### Section 1. Identifying Information

|   |   |  |
|---|---|--|
| 1. Given Name (First Name)<br>Jesse   | 2. Surname (Last Name)<br>Otero                                     | 3. Date<br>27-September-2019                 |
| 4. Are you the corresponding author?  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name<br>Timothy Brown |
| 5. Manuscript Title<br>Nonoperative treatment of a pathologic periprosthetic tibia fracture in the setting of prior total knee arthroplasty |   |  |
| 6. Manuscript Identifying Number (if you know it)   |   |  |

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Dr. Otero has nothing to disclose.

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### Section 1. Identifying Information

|   |   |  |
|---|---|--|
| 1. Given Name (First Name)<br>Malynda   | 2. Surname (Last Name)<br>Wynn                                      | 3. Date<br>27-September-2019                 |
| 4. Are you the corresponding author?  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name<br>Timothy Brown |
| 5. Manuscript Title<br>Nonoperative treatment of a pathologic periprosthetic tibia fracture in the setting of prior total knee arthroplasty |   |  |
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Dr. Wynn has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name)  
Timothy

2. Surname (Last Name)  
Brown

3. Date  
27-September-2019

4. Are you the corresponding author?  Yes  No

5. Manuscript Title  
Nonoperative treatment of a pathologic periprosthetic tibia fracture in the setting of prior total knee arthroplasty

6. Manuscript Identifying Number (if you know it)

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