ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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**ICMJE Form for Disclosure of Potential Conflicts of Interest**

### Section 1. Identifying Information

1. Given Name (First Name)  
Benjamin  

2. Surname (Last Name)  
Miller  

3. Date  
18-December-2019  

4. Are you the corresponding author?  
- No  
- Yes  

   Corresponding Author’s Name  
Malynda Wynn  

5. Manuscript Title  
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)  
CC-D-19-00517R2

### Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?  
- No  
- Yes

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Are there any relevant conflicts of interest?  
- No  
- Yes

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
- No  
- Yes
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Dr. Miller has nothing to disclose.

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Christopher

2. Surname (Last Name)  
   Carender

3. Date  
   19-September-2019

4. Are you the corresponding author?  
   ✔ 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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Dr. Carender has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name)  
   Jesse

2. Surname (Last Name)  
   Otero

3. Date  
   27-September-2019

4. Are you the corresponding author?  
   ✔ No

   Corresponding Author’s Name  
   Timothy Brown

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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Section 1. Identifying Information

1. Given Name (First Name)  Malynda
2. Surname (Last Name)  Wynn
3. Date  27-September-2019
4. Are you the corresponding author?  Yes  No
   Corresponding Author’s Name  Timothy Brown
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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Dr. Wynn has nothing to disclose.

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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  
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Dr. Brown has nothing to disclose.

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