ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions
The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking “No” means that you did the work without receiving any financial support from any third party – that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check “Yes”.

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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)  
Nicholas

2. Surname (Last Name)  
Desy

3. Date  
11-November-2019

4. Are you the corresponding author?  
☑ Yes ☐ No

5. Manuscript Title  
Proximal hamstring tendon avulsion resulting in acute posterior thigh compartment syndrome: 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.)?  
Are there any relevant conflicts of interest?  
☐ Yes ☑ No

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Section 6. Disclosure Statement

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Dr. Desy has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  Jennifer
2. Surname (Last Name)  Purnell
3. Date  13-December-2019

4. Are you the corresponding author?  ☑ Yes  ☐ No

Corresponding Author's Name  Dr Nicholas Desy

5. Manuscript Title
Proximal hamstring tendon avulsion resulting in acute posterior thigh compartment syndrome: A case report

6. Manuscript Identifying Number (if you know it)
CC-D-19-00585

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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Dr Jennifer Purnell has nothing to disclose

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Section 1. Identifying Information

1. Given Name (First Name)  
   Kelly

2. Surname (Last Name)  
   Johnston

3. Date  
   09-November-2019

4. Are you the corresponding author?  
   ☐ Yes  ☑ No

Corresponding Author’s Name  
   Nicholas Desy

5. Manuscript Title  
   Proximal hamstring tendon avulsion resulting in acute posterior thigh compartment syndrome: A case report

6. Manuscript Identifying Number (if you know it)

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Section 1. Identifying Information

1. Given Name (First Name)  Michael
2. Surname (Last Name)  Monument
3. Date  06-November-2019

4. Are you the corresponding author?  ☑ No  Corresponding Author’s Name  Dr Nicholas Desy

5. Manuscript Title  Proximal hamstring tendon avulsion resulting in acute posterior thigh compartment syndrome: A case report

6. Manuscript Identifying Number (if you know it)  CC-D-19-00585

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