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.

1. Identifying information.

2. The work under consideration for publication.

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

5. Relationships not covered above.

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Royalties: Funds are coming in to you or your institution due to your patent
Section 1. Identifying Information

1. Given Name (First Name)  Christopher
2. Surname (Last Name)  Beauchamp
3. Date  20-November-2020
4. Are you the corresponding author?  Yes [ ] No [X]

Corresponding Author’s Name  Kade McQuivey

5. Manuscript Title  
The Double DAIR: A 2-Stage Debridement with Prosthesis-Retention Protocol for Acute Periprosthetic Joint Infections

6. Manuscript Identifying Number (if you know it)  ST-D-19-00071

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. Beauchamp has nothing to disclose.

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<tbody>
<tr>
<td>Joshua</td>
<td>Bingham</td>
<td>21-November-2020</td>
</tr>
</tbody>
</table>

4. Are you the corresponding author? [ ] Yes [x] No

Corresponding Author’s Name
Kade McQuivey, MD

5. Manuscript Title
The Double DAIR: A 2-Stage Debridement with Prosthesis-Retention Protocol for Acute Periprosthetic Joint Infections

6. Manuscript Identifying Number (if you know it)
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Dr. Bingham 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)  
   Andrew

2. Surname (Last Name)  
   Chung

3. Date  
   21-November-2020

4. Are you the corresponding author?  
   Yes ☑️ No

   Corresponding Author’s Name  
   Kade McQuivey, MD

5. Manuscript Title  
   The Double DAIR: A 2-Stage Debridement with Prosthesis-Retention Protocol for Acute Periprosthetic Joint Infections

6. Manuscript Identifying Number (if you know it)  
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Dr. Chung 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) Henry
2. Surname (Last Name) Clarke
3. Date 23-November-2020
4. Are you the corresponding author? [ ] Yes [x] No
   Corresponding Author’s Name
   Kade McQuivey
5. Manuscript Title
   The Double DAIR: A 2-Stage Debridement with Prosthesis-Retention Protocol for Acute Periprosthetic Joint Infections
6. Manuscript Identifying Number (if you know it)
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If yes, please fill out the appropriate information below.

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<tr>
<th>Name of Entity</th>
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<th>Non-Financial Support?</th>
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Publishing Income- AAOS/Journal of the American Academy of Orthopedic Surgeons

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Dr. Clarke reports personal fees and other from Zimmer Biomet, personal fees and other from ConforMIS, outside the submitted work; and Publishing Income- AAOS/Journal of the American Academy of Orthopedic Surgeons.

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McQuivey

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
Kade

2. Surname (Last Name)  
McQuivey

3. Date  
21-November-2020

4. Are you the corresponding author?  
✔ Yes  ❌ No

5. Manuscript Title  
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Dr. McQuivey has nothing to disclose.

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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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**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)  Jordan
2. Surname (Last Name)  Pollock
3. Date  21-November-2020
4. Are you the corresponding author?  Yes  No
   Corresponding Author’s Name  Kade McQuivey, MD
5. Manuscript Title
   The Double DAIR: A 2-Stage Debridement with Prosthesis-Retention Protocol for Acute Periprosthetic Joint Infections
6. Manuscript Identifying Number (if you know it)
   ST-D-19-00071

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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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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Jordan Pollock has nothing to disclose.

Evaluation and Feedback

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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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# ICMJE Form for Disclosure of Potential Conflicts of Interest

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<tr>
<td>Adam</td>
<td>Schwartz</td>
<td>23-November-2020</td>
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4. Are you the corresponding author? [ ] Yes [ ] No

Corresponding Author’s Name

Kade McQuivey

5. Manuscript Title

The Double DAIR: A 2-Stage Debridement with Prosthesis-Retention Protocol for Acute Periprosthetic Joint Infections

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ST-D-19-00071

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Dr. Schwartz has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
Mark

2. Surname (Last Name)  
Spangehl

3. Date  
21-November-2020

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

5. Manuscript Title  
The Double DAIR: A 2-Stage Debridement with Prosthesis-Retention Protocol for Acute Periprosthetic Joint Infections

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If yes, please fill out the appropriate information below.

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Dr. Spangehl reports personal fees from BodyCad, grants from DepuySynthes, grants from Stryker, non-financial support from Zimmer Biomet, other from Arthroplasty Today, other from Journal of Arthroplasty, other from AAHKS, outside the submitted work;

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