

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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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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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) Jianing	2. Surname (Last Name) Di	3. Date 13-September-2016
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Prakash Jayakumar
5. Manuscript Title Patient-focused Technology-Enabled Programs Improve Outcomes in Primary Total Hip (THR) and Knee Replacement (TKR) Surgery		
6. Manuscript Identifying Number (if you know it)		

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Dr. Di has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)
Victoria

2. Surname (Last Name)
Nadarajah

3. Date
09-September-2016

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Prakash Jayakumar

5. Manuscript Title
Patient-focused Technology-Enabled Programs Improve Outcomes in Primary Total Hip (THR) and Knee Replacement (TKR) Surgery

6. Manuscript Identifying Number (if you know it)

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Victoria Nadarajah has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Marcus

2. Surname (Last Name)
Banks

3. Date
05-September-2016

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Mr Prakash Jayakumar MBBS Bsc(Hons) MRCS (Eng) Dip S₊

5. Manuscript Title
Patient-focused Technology-Enabled Programs Improve Outcomes in Primary Total Hip (THR) and Knee Replacement (TKR) Surgery

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Dr. Bankes 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) Joyce 2. Surname (Last Name) Craig 3. Date 25-July-2016

4. Are you the corresponding author? Yes No Corresponding Author's Name
Jayakumar P

5. Manuscript Title
Patient-focused Technology-Enabled Programs Improve Outcomes in Primary Total Hip (THR) and Knee Replacement (TKR) Surgery

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Johnson & Johnson	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	YHEC received payment for advising on the costing aspects of the study

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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
Johnston & Johnston	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	YHEC has undertaken another small project with J&J. Original contract was with Synthes an independent company, subsequently taken over by J&J.

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Section 4. Intellectual Property -- Patents & Copyrights

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Ms Craig reports payment received by YHEC from Johnson & Johnson, during the conduct of the study; also payment for another small project conducted by YHEC for Johnston & Johnston, outside the submitted work..

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Section 1. Identifying Information

1. Given Name (First Name) Jiayu	2. Surname (Last Name) Fu	3. Date 26-July-2016
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Prakash Jayakumar
5. Manuscript Title Patient -focused Technology-Enabled Programs Improve Outcomes in Primary Total Hip (THR) and Knee Replacement (TKR) Surgery		
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Dr. Fu has nothing to disclose.

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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) Prakash 2. Surname (Last Name) Jayakumar 3. Date 23-August-2016

4. Are you the corresponding author? Yes No

5. Manuscript Title
Patient-focused Technology-Enabled Programs Improve Outcomes in Primary Total Hip (THR) and Knee Replacement (TKR) Surgery

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

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Janssen Healthcare Innovation. Johnson and Johnson Medical Devices.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consulting fees.

Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were **present during the 36 months prior to publication**.

Are there any relevant conflicts of interest? Yes No

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Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

Section 5. Relationships not covered above

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Section 6. Disclosure Statement

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Dr. Jayakumar reports personal fees from Janssen Healthcare Innovation. Johnson and Johnson Medical Devices., during the conduct of the study; personal fees from Janssen Healthcare Innovation. Johnson and Johnson Medical Devices., outside the submitted work; .

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)
Vicki

2. Surname (Last Name)
Joughin

3. Date
08-August-2016

4. Are you the corresponding author? Yes No
Corresponding Author's Name
Prakash Jayakumar

5. Manuscript Title
Patient-Focused Technology-Enabled Programs Improve Outcomes in Primary Total Hip (THR) and Knee Replacement (TKR) Surgery

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest? Yes No

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Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Johnson & Johnson Medical	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Employee

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

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Johnson & Johnson Medical	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Employee

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

Section 5. Relationships not covered above

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Section 6. Disclosure Statement

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At the time of submitting the manuscript for publication I am Senior Director of Health Economics and Market Access (Europe Middle East and Africa) employed by Johnson & Johnson Medical LTD.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Zameer

2. Surname (Last Name)

Shah

3. Date

04-September-2016

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

Prakash Jayakumar

5. Manuscript Title

Patient Focused Technology Enabled Programs Improve Outcomes in Primary Total Hip and Knee Replacement Surgery

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

ICMJE Form for Disclosure of Potential Conflicts of Interest

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Section 6. Disclosure Statement

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Dr. Shah 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)

Jade

2. Surname (Last Name)

Cope

3. Date

01-February-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Prakash Jayakumar

5. Manuscript Title

Patient-focused Technology-Enabled Programs Improve Outcomes in Primary Total Hip (THR) and Knee Replacement (TKR) Surgery

6. Manuscript Identifying Number (if you know it)

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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. Cope 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) Peter	2. Surname (Last Name) Earnshaw	3. Date 01-February-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Prakash Jayakumar
5. Manuscript Title Patient-focused Technology-Enabled Programs Improve Outcomes in Primary Total Hip (THR) and Knee Replacement (TKR) Surgery		
6. Manuscript Identifying Number (if you know it)		

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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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