

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)

Jason

2. Surname (Last Name)

Hsu

3. Date

04-February-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Frederick A. Matsen III, M.D.

5. Manuscript Title

Outcomes from a Standard All-Polyethylene Glenoid Component used in an Anatomic Total Shoulder Arthroplasty for Primary Osteoarthritis with Glenoid Deficiencies

6. Manuscript Identifying Number (if you know it)

JBJSOA-D-20-00002

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Dr. Hsu has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Frederick

2. Surname (Last Name)
Matsen III

3. Date
04-February-2020

4. Are you the corresponding author? Yes No

5. Manuscript Title
Outcomes from a Standard All-Polyethylene Glenoid Component used in an Anatomic Total Shoulder Arthroplasty for Primary Osteoarthritis with Glenoid Deficiencies

6. Manuscript Identifying Number (if you know it)
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Section 2. The Work Under Consideration for Publication

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Dr. Matsen III has nothing to disclose.

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1. Given Name (First Name)
Anastasia

2. Surname (Last Name)
Whitson

3. Date
04-February-2020

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Frederick A. Matsen III, M.D.

5. Manuscript Title
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1. Given Name (First Name) Jeremy	2. Surname (Last Name) Somerson	3. Date 04-February-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Frederick A. Matsen III, M.D.
5. Manuscript Title Outcomes from a Standard All-Polyethylene Glenoid Component used in an Anatomic Total Shoulder Arthroplasty for Primary Osteoarthritis with Glenoid Deficiencies		
6. Manuscript Identifying Number (if you know it) JBJSOA-D-20-00002		

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Dr. Somerson has nothing to disclose.

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