

## 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) Amit	2. Surname (Last Name) Momaya	3. Date 24-March-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Brent A. Ponce, MD
5. Manuscript Title Discrepancies Among Industry's Highly Compensated Orthopaedic Surgeons		
6. Manuscript Identifying Number (if you know it) JBJSOA-D-21-00015		

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Dr. Almaguer 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) Anthony	2. Surname (Last Name) Wilson	3. Date 24-March-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Brent A. Ponce, MD
5. Manuscript Title Discrepancies Among Industry's Highly Compensated Orthopaedic Surgeons		
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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Alexander

2. Surname (Last Name)  
Kofskey

3. Date  
24-March-2021

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Brent A. Ponce, MD

5. Manuscript Title  
Discrepancies Among Industry's Highly Compensated Orthopaedic Surgeons

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4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Brent A. Ponce, MD
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Dr. Almaguer 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) Joseph	2. Surname (Last Name) Robin	3. Date 24-March-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Brent A. Ponce, MD
5. Manuscript Title Discrepancies Among Industry's Highly Compensated Orthopaedic Surgeons		
6. Manuscript Identifying Number (if you know it) JBJSOA-D-21-00015		

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

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Dr. Robin has nothing to disclose.

### 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) Sudarsan	2. Surname (Last Name) Murali	3. Date 24-March-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Brent A. Ponce, MD
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Are there any relevant conflicts of interest?  Yes  No

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Mr. Murali 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)  
Bradley

2. Surname (Last Name)  
Wills

3. Date  
24-March-2021

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Brent A. Ponce, MD

5. Manuscript Title  
Discrepancies Among Industry's Highly Compensated Orthopaedic Surgeons

6. Manuscript Identifying Number (if you know it)  
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Dr. Almaguer 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)  
Brent

2. Surname (Last Name)  
Ponce

3. Date  
24-March-2021

4. Are you the corresponding author?  Yes  No

5. Manuscript Title  
Discrepancies Among Industry's Highly Compensated Orthopaedic Surgeons

6. Manuscript Identifying Number (if you know it)  
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Dr. Almaguer has nothing to disclose.

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1. Given Name (First Name) Gerald	2. Surname (Last Name) McGwin	3. Date 24-March-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Brent A. Ponce, MD
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1. Given Name (First Name) Adam	2. Surname (Last Name) Almaguer	3. Date 24-March-2021
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### Section 5. Relationships not covered above

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At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

### Section 6. Disclosure Statement

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Dr. Almaguer has nothing to disclose.

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