ICMJE Form for Disclosure of Potential Conflicts of Interest

**Instructions**

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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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# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Section 1. Identifying Information

1. Given Name (First Name)  
   Thomas  
2. Surname (Last Name)  
   An  
3. Date  
   28-October-2015  
4. Are you the corresponding author?  
   Yes ✗ No  
   Corresponding Author’s Name  
   Dr. Jonathan Schoenecker  
5. Manuscript Title  
   Pediatric Musculoskeletal Infection: Hijacking the Acute Phase Response  
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

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Mr. An has nothing to disclose.

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Michael

2. Surname (Last Name)  
   Benvenuti

3. Date  
   16-October-2015

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

   Corresponding Author’s Name  
   Jonathan Schoenecker

5. Manuscript Title  
   Pediatric Musculoskeletal Infection: Hijacking the Acute Phase Response

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Mr. Benvenuti has nothing to disclose.

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<td>3. Date</td>
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<td>4. Are you the corresponding author?</td>
<td>[ ] Yes [ ] No</td>
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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Jonathan

2. Surname (Last Name)  
   Schoenecker

3. Date  
   15-October-2015

4. Are you the corresponding author?  
   ✔ Yes  
   No

5. Manuscript Title  
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Section 1. Identifying Information

1. Given Name (First Name) Isaac
2. Surname (Last Name) Thomsen
3. Date 15-October-2015
4. Are you the corresponding author? ☑ No
5. Manuscript Title
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6. Manuscript Identifying Number (if you know it)

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Dr. Thomsen has nothing to disclose.

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