

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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#### 2. The work under consideration for publication.

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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)  
Andrew

2. Surname (Last Name)  
Pepper

3. Date  
15-February-2018

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Omar A Behery

5. Manuscript Title  
Total Hip and Knee Arthroplasty Perioperative Pain Management: What Should Be In the Cocktail

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

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Are there any relevant conflicts of interest?  Yes  No

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Dr. Pepper 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) Jonathan	2. Surname (Last Name) Vigdorichik	3. Date 16-February-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Omar A Behery
5. Manuscript Title Total Hip and Knee Arthroplasty Perioperative Pain Management: What Should Be In the Cocktail		
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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### Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Vigdorchik has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name) John	2. Surname (Last Name) Mercuri	3. Date 15-February-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Omar A Behery
5. Manuscript Title Total Hip and Knee Arthroplasty Perioperative Pain Management: What Should Be In the Cocktail		
6. Manuscript Identifying Number (if you know it) NA		

### Section 2. The Work Under Consideration for Publication

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Dr. Mercuri 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)

Omar

2. Surname (Last Name)

Behery

3. Date

14-February-2018

4. Are you the corresponding author?

Yes  No

5. Manuscript Title

Total Hip and Knee Arthroplasty Perioperative Pain Management: What Should Be in the Cocktail

6. Manuscript Identifying Number (if you know it)

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