

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.

1. Identifying information.

2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

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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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Other: Anything not covered under the previous three boxes

Pending: The patent has been filed but not issued

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Licensed: The patent has been licensed to an entity, whether earning royalties or not

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)

Geoffrey

2. Surname (Last Name)

Marecek

3. Date

16-February-2019

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Nate Heckmann

5. Manuscript Title

Wound Irrigation for Open Fractures:

A Review of the Current Literature

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

Section 3. Relevant financial activities outside the submitted work.

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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
DePuy Synthes	☐	☒	☐	☐	
Globus Medical	☐	☒	☐	☐	
Zimmer Biomet	☐	☒	☐	☐	
BoneSupport AB	☒	☐	☐	☐	Site PI for multicenter trial of local antibiotics in open fractures

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Section 4. Intellectual Property -- Patents & Copyrights

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Section 6. Disclosure Statement

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Dr. Marecek reports personal fees from DePuy Synthes, personal fees from Globus Medical, personal fees from Zimmer Biomet, grants from BoneSupport AB, 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) Trevor	2. Surname (Last Name) Simcox	3. Date 30-January-2019
4. Are you the corresponding author? ☐ Yes ☒ No		Corresponding Author's Name Nathanael Heckmann
5. Manuscript Title Wound Irrigation for Open Fractures: A Review of the Current Literature		
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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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Simcox has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Nathanael

2. Surname (Last Name)
Heckmann

3. Date
27-January-2019

4. Are you the corresponding author? ☒ Yes ☐ No

5. Manuscript Title
Wound Irrigation for Open Fractures: A Review of the Current Literature

6. Manuscript Identifying Number (if you know it)

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Section 1. Identifying Information

1. Given Name (First Name)
Daniel

2. Surname (Last Name)
Kelley

3. Date
01-April-2019

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Nathanael Heckmannn

5. Manuscript Title
Wound Irrigation for Open Fractures: A Review of the Current Literature

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