

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.

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3. Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

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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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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) Bryan	2. Surname (Last Name) Vopat	3. Date 08-January-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Mary K. Mulcahey
5. Manuscript Title Epidemiology, Diagnosis, and Management of Tibial Tubercle Avulsion Fractures in Adolescents		
6. Manuscript Identifying Number (if you know it)		

Section 2. The Work Under Consideration for Publication

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Section 4. Intellectual Property -- Patents & Copyrights

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

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Dr. Vopat 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)

Mary

2. Surname (Last Name)

Mulcahey

3. Date

08-January-2020

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Epidemiology, Diagnosis, and Management of Tibial Tubercle Avulsion Fractures in Adolescents

6. Manuscript Identifying Number (if you know it)

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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
AAOS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Board/Committee member
ACSM Translational Journal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Editorial/Governing Board
AOSSM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Board/Committee member
Arthrex	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
AANA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Board/Committee member
Ortho Info	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Editorial/Governing Board
Ruth Jackson Orthopaedic Society	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Board/Committee member
The Forum	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Board/Committee member

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Dr. Mulcahey reports other from AAOS, other from ACSM Translational Journal, other from AOSSM, personal fees from Arthrex, other from AANA, other from Ortho Info, other from Ruth Jackson Orthopaedic Society, other from The Forum, outside the submitted work; .

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Wendell

2. Surname (Last Name)
Cole

3. Date
08-January-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Mary K. Mulcahey

5. Manuscript Title
Epidemiology, Diagnosis, and Management of Tibial Tubercle Avulsion Fractures in Adolescents

6. Manuscript Identifying Number (if you know it)

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Dr. Cole has nothing to disclose.

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1. Given Name (First Name) Wendell 2. Surname (Last Name) Heard 3. Date 08-January-2020

4. Are you the corresponding author? Yes No Corresponding Author's Name
Mary K. Mulcahey

5. Manuscript Title
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If yes, please fill out the appropriate information below.

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AANA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Board/Committee member

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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. Heard reports other from AANA, outside the submitted work; .

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Section 1. Identifying Information

1. Given Name (First Name) Symone	2. Surname (Last Name) Brown	3. Date 08-January-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Mary K. Mulcahey
5. Manuscript Title Epidemiology, Diagnosis, and Management of Tibial Tubercle Avulsion Fractures in Adolescents		
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