

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)
Ophelie

2. Surname (Last Name)
Lavoie-Gagne

3. Date
05-September-2019

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Benedict U. Nwachukwu

5. Manuscript Title
Factors predictive of increased postoperative narcotic usage following orthopaedic surgery

6. Manuscript Identifying Number (if you know it)
REVIEWS-D-19-00095

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Ms. Lavoie-Gagne has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Yining

2. Surname (Last Name)

Lu

3. Date

05-September-2019

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Benedict U. Nwachukwu

5. Manuscript Title

Factors predictive of increased postoperative narcotic usage following orthopaedic surgery

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REVIEWS-D-19-00095

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Section 1. Identifying Information

1. Given Name (First Name)

Benedict

2. Surname (Last Name)

Nwachukwu

3. Date

05-September-2019

4. Are you the corresponding author?

☒ Yes ☐ No

5. Manuscript Title

Factors predictive of increased postoperative narcotic usage following orthopaedic surgery

6. Manuscript Identifying Number (if you know it)

REVIEWS-D-19-00095

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Dr. Nwachukwu has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Answorth	2. Surname (Last Name) Allen	3. Date 05-September-2019
4. Are you the corresponding author? ☐ Yes ☒ No		Corresponding Author's Name Benedict U. Nwachukwu
5. Manuscript Title Factors predictive of increased postoperative narcotic usage following orthopaedic surgery		
6. Manuscript Identifying Number (if you know it) REVIEWS-D-19-00095		

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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
Pristine Surgical	☐	☒	☐	☐	Stock or stock Options
Rom3	☐	☒	☐	☐	Stock or stock Options

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Dr. Allen reports personal fees from Pristine Surgical, personal fees from Rom3, outside the submitted work; .

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Timothy

2. Surname (Last Name)

Leroux

3. Date

05-September-2019

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☐ Yes

☒ No

Corresponding Author's Name

Benedict U. Nwachukwu

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Dr. Leroux has nothing to disclose.

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Use this section to report other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work.

Definitions.

Entity: government agency, foundation, commercial sponsor, academic institution, etc.

Grant: A grant from an entity, generally [but not always] paid to your organization

Personal Fees: Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

Non-Financial Support: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

Other: Anything not covered under the previous three boxes

Pending: The patent has been filed but not issued

Issued: The patent has been issued by the agency

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) Brian	2. Surname (Last Name) Forsythe	3. Date 05-September-2019
4. Are you the corresponding author? ☐ Yes ☒ No		Corresponding Author's Name Benedict U. Nwachukwu
5. Manuscript Title Factors predictive of increased postoperative narcotic usage following orthopaedic surgery		
6. Manuscript Identifying Number (if you know it) REVIEWS-D-19-00095		

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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Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were **present during the 36 months prior to publication**.

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If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Arthrex, Inc	☒	☐	☐	☐	Research Support
Elsevier	☐	☒	☐	☐	Publishing royalties, financial or material support
Jace Medical	☐	☒	☐	☐	Stock or stock options
Smith & Nephew	☒	☐	☐	☐	Research Support
Stryker	☒	☒	☐	☐	Paid consultant; Research Support

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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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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

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Forsythe reports grants from Arthrex, Inc, personal fees from Elsevier, personal fees from Jace Medical, grants from Smith & Nephew, grants and personal fees from Stryker, outside the submitted work; .

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