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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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**ICMJE Form for Disclosure of Potential Conflicts of Interest**

**Section 1. Identifying Information**

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<td>Michele</td>
<td>D’Apuzzo</td>
<td>19-June-2016</td>
</tr>
</tbody>
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4. Are you the corresponding author?  
   ✔ Yes  
   No

Corresponding Author’s Name  
Stephen Lyman, PhD

5. Manuscript Title  
All-Cause versus Complication-Specific Readmission following Total Knee Arthroplasty

6. Manuscript Identifying Number (if you know it)

---

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Are there any relevant conflicts of interest?  
✔ Yes  
No

---

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✔ Yes  
No

---

**Section 4. Intellectual Property -- Patents & Copyrights**

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
✔ Yes  
No
ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. D'Apuzzo 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)  
   Chisa

2. Surname (Last Name)  
   Hidaka

3. Date  
   16-June-2016

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

   Corresponding Author’s Name  
   Stephen Lyman

5. Manuscript Title  
   All-Cause versus Complication-Specific Readmission following Total Knee Arthroplasty

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest?  
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**Section 4. Intellectual Property -- Patents & Copyrights**

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Dr. Hidaka has nothing to disclose.

Evaluation and Feedback

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Jung Pan
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Ting
2. Surname (Last Name)  Jung Pan
3. Date  27-June-2016
4. Are you the corresponding author?  No

5. Manuscript Title
All-Cause versus Complication-Specific Readmission following Total Knee Arthroplasty

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?  No

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Dr. Jung Pan has nothing to disclose.

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Stephen  

2. Surname (Last Name)  
   Lyman  

3. Date  
   23-June-2016  

4. Are you the corresponding author?  
   ✔ Yes  
   ❌ No  

5. Manuscript Title  
   All-cause versus complication-specific readmission following total knee arthroplasty  

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. If you have more than one entity press the “ADD” button to add a row. Excess rows can be removed by pressing the “X” button.

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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. Lyman reports grants from NIAMS, grants from AHRQ Center for Evaluation and Research in Therapeutics, during the conduct of the study; personal fees from Journal of Bone & Joint Surgery, outside the submitted work.

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<tr>
<td>2. Surname (Last Name)</td>
<td>Westrich</td>
</tr>
<tr>
<td>3. Date</td>
<td>01-March-2017</td>
</tr>
<tr>
<td>4. Are you the corresponding author?</td>
<td>Yes ☑ No ❌</td>
</tr>
<tr>
<td>Corresponding Author’s Name</td>
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Dr. Westrich has nothing to disclose.

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.