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.

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**Section 1. Identifying Information**

1. Given Name (First Name) Eric  
2. Surname (Last Name) Ricchetti  
3. Date 08-July-2016  
4. Are you the corresponding author? ☑ Yes

**Corresponding Author’s Name**  
Joseph P. Iannotti, MD, PhD  

5. Manuscript Title  
Quantitative Measurement of Bony Pathology in Advanced Glenohumeral Osteoarthritis

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

---

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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.  
Are there any relevant conflicts of interest? ☑ Yes

If yes, please fill out the appropriate information below.

<table>
<thead>
<tr>
<th>Name of Entity</th>
<th>Grant?</th>
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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

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Dr. Ricchetti reports grants and personal fees from DePuy, A Johnson & Johnson Company, outside the submitted work.

Evaluation and Feedback

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Joseph

2. Surname (Last Name)  
   Iannotti

3. Date  
   08-July-2016

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

5. Manuscript Title  
   Quantitative Measurement of Bony Pathology in Advanced Glenohumeral Osteoarthritis

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**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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Dr. Iannotti reports personal fees from DePuy Synthes, personal fees from Zimmer, personal fees from Integra, personal fees from DJO, personal fees from Tornier, personal fees from Lippincott, personal fees from Arthrex, outside the submitted work.

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<tbody>
<tr>
<td>Bong-Jae</td>
<td>Jun</td>
<td>07-July-2016</td>
</tr>
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</table>

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

Corresponding Author’s Name: Joseph P. Iannotti

5. Manuscript Title
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1. Given Name (First Name)  
   Thomas  
2. Surname (Last Name)  
   Patterson  
3. Date  
   07-July-2016  
4. Are you the corresponding author?  
   [ ] Yes  
   [x] No  
   Corresponding Author’s Name  
   Joseph P. Iannotti  
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