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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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
   Judith

2. Surname (Last Name)
   Baumhauer

3. Date
   22-July-2015

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

   Corresponding Author’s Name
   Christopher W. DiGiovanni

5. Manuscript Title
   The Importance of Sufficient Graft Material in Achieving a Critical Foot or Ankle Fusion Mass

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?  [X] 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 3. Relevant financial activities outside the submitted work.

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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Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  

☐ Yes  ✔ No

Section 5. Relationships not covered above

Are there 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?

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Section 6. Disclosure Statement

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Dr. Baumhauer reports grants from Biomimetic Therapeutics, non-financial support from Wright Medical, during the conduct of the study; personal fees from Wright Medical, outside the submitted work.

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### Section 1. Identifying Information

1. **Given Name (First Name)**  
   William

2. **Surname (Last Name)**  
   Beasley

3. **Date**  
   22-July-2015

4. **Are you the corresponding author?**  
   Yes

5. **Manuscript Title**  
   The Importance of Sufficient Graft Material in Achieving a Critical Foot or Ankle Fusion Mass

### 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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Mr. Beasley reports other from Wright Medical Technologies, Inc, during the conduct of the study; other from Wright Medical Technologies, Inc, outside the submitted work; .

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Section 1. Identifying Information

1. Given Name (First Name) Timothy
2. Surname (Last Name) Daniels
3. Date 22-July-2015
4. Are you the corresponding author? Yes ☑ No

Corresponding Author’s Name
Christopher W. DiGiovanni

5. Manuscript Title
The Importance of Sufficient Graft Material in Achieving a Critical Foot or Ankle Fusion Mass

6. Manuscript Identifying Number (if you know it)

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Section 1. Identifying Information
1. Given Name (First Name)          2. Surname (Last Name)          3. Date
Christopher                          DiGiovanni                        02-August-2015

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

5. Manuscript Title
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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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   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)  
Rafe

2. Surname (Last Name)  
Donahue

3. Date  
22-July-2015

4. Are you the corresponding author?  

   ✔ Yes  
   □ No

   Corresponding Author’s Name  
Christopher W. DiGiovanni

5. Manuscript Title  
The Importance of Sufficient Graft Material in Achieving a Critical Foot or Ankle Fusion Mass

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest?  

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   □ No

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<td>□</td>
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<td>As an employee of Wright Medical, part of my job is analysis of data such as these.</td>
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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?  
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Dr. Donahue reports other from Wright Medical, during the conduct of the study; other from Wright Medical, outside the submitted work; .

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### Section 1. Identifying Information

1. **Given Name (First Name)**
   - Peter

2. **Surname (Last Name)**
   - Evangelista

3. **Date**
   - 22-July-2015

4. Are you the corresponding author?  
   - Yes

5. **Manuscript Title**
   - The Importance of Sufficient Graft Material in Achieving a Critical Foot or Ankle Fusion Mass

6. **Manuscript Identifying Number (if you know it)**

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1. Given Name (First Name)  
   Mark

2. Surname (Last Name)  
   Glazebrook

3. Date  
   22-July-2015

4. Are you the corresponding author?  
   ✔ Yes  
   No

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I am Associate Editor for Foot Ankle International.
I am founder of Orthobiologic company called CreOsso, but the focus is not related to this paper.

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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. Lin reports non-financial support from BMTI of Wright, during the conduct of the study; personal fees from BMTI of Wright, personal fees from Tissuegene, personal fees from DJO, outside the submitted work; and I am Associate Editor for Foot Ankle International.
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