ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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### Section 1. Identifying Information

1. **Given Name (First Name)**
   Kai-Nan

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

3. **Date**
   02-July-2015

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

5. **Manuscript Title**
   Repairing the Capsule to the Grafted Bone Increases Range of Motion in the Latarjet Procedure

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

### 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. AN has nothing to disclose.

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<tbody>
<tr>
<td>Alexander</td>
<td>Hooke</td>
<td>02-July-2015</td>
</tr>
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4. Are you the corresponding author? [ ] Yes [ ✔ ] No

Corresponding Author’s Name
Kai-Nan An, Ph.D.

5. Manuscript Title
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Dr. Hooke has nothing to disclose.

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<tr>
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1. Given Name (First Name)  
   Yoshiaki

2. Surname (Last Name)  
   Itoigawa

3. Date  
   02-July-2015

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   [ ] Yes  [ ] No

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   Kai-Nan An, Ph.D.

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Dr. Itoigawa has nothing to disclose.

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<th>1. Given Name (First Name)</th>
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<tr>
<td>2. Surname (Last Name)</td>
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<td>Kai-Nan An, Ph.D.</td>
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Dr. Sperling has nothing to disclose.

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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)  
Scott

2. Surname (Last Name)  
Steinmann

3. Date  
02-July-2015

4. Are you the corresponding author?  
Yes ☐  No ☑  
Corresponding Author’s Name  
Kai-Nan An, Ph.D.

5. Manuscript Title  
Repairing the Capsule to the Grafted Bone Increases Range of Motion in the Latarjet Procedure

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

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

If yes, please fill out the appropriate information below.

<table>
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<th>Name of Entity</th>
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<td>royalty</td>
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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Dr. Steinmann reports other from Biomet, other from Arthrex, 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) Nobuyuki
2. Surname (Last Name) Yamamoto
3. Date 07-July-2015

4. Are you the corresponding author? ☑ No

Corresponding Author’s Name Kai-Nan An

5. Manuscript Title
   Repairing the Capsule to the Grafted Bone Increases Range of Motion in the Latarjet Procedure

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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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**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. Yamamoto has nothing to disclose.

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## Section 1. Identifying Information

1. Given Name (First Name)  
   Kristin  

2. Surname (Last Name)  
   Zhao  

3. Date  
   02-July-2015  

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

   Corresponding Author’s Name  
   Kai-Nan An, Ph.D.  

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Are there any relevant conflicts of interest?  
[ ] Yes  
[ ] No  

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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[ ] No
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4. Are you the corresponding author? [ ] Yes [x] No

Corresponding Author’s Name

An Kai-Nan

5. Manuscript Title

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Are there any relevant conflicts of interest? [x] Yes [ ] No

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<tr>
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Dr. Itoigawa reports grants from Alumni Scholarship of Juntendo University School of Medicine, grants from Division of Orthopedic Research, Mayo Clinic, during the conduct of the study.

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