ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name)  
   In Ho

2. Surname (Last Name)  
   Choi

3. Date  
   06-September-2015

4. Are you the corresponding author?  
   ☐ Yes  ☑ No  
   Corresponding Author’s Name  
   Tae-Joon Cho

5. Manuscript Title  
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6. Manuscript Identifying Number (if you know it)

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Dr. Choi has nothing to disclose.

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Jun Ho

2. Surname (Last Name)  
   Kim

3. Date  
   02-September-2015

4. Are you the corresponding author?  
   - Yes  
   - No  
   ✔ No  
   Corresponding Author’s Name  
   Tae-Joon Cho

5. Manuscript Title  
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Kim
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<table>
<thead>
<tr>
<th>1. Given Name (First Name)</th>
<th>Moon Seok</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Surname (Last Name)</td>
<td>Park</td>
</tr>
<tr>
<td>3. Date</td>
<td>04-September-2015</td>
</tr>
<tr>
<td>4. Are you the corresponding author?</td>
<td>Yes</td>
</tr>
<tr>
<td>5. Manuscript Title</td>
<td>Acetabular Remodeling and Role of Osteotomy after Closed Reduction in Developmental Dysplasia of the Hip</td>
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Dr. Park has nothing to disclose.

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1. Given Name (First Name)  Chang Ho
2. Surname (Last Name)  Shin
3. Date  04-September-2015
4. Are you the corresponding author?  [ ] Yes  [X] No
   Corresponding Author’s Name  Tae-Joon Cho
5. Manuscript Title  Acetabular Remodeling and Role of Osteotomy after Closed Reduction in Developmental Dysplasia of the Hip
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<td>Yoo</td>
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Dr. Yoo has nothing to disclose.

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5. **Relationships not covered above.**

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**Definitions.**

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

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

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

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**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)  Tae-Joon
2. Surname (Last Name)  Cho
3. Date  31-August-2015
4. Are you the corresponding author?  Yes  No

5. Manuscript Title  Acetabular Remodeling and Role of Osteotomy after Closed Reduction in Developmental Dysplasia of the Hip
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  No

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