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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**Other:** Anything not covered under the previous three boxes

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**Section 1. Identifying Information**

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<tr>
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<td>Bosco</td>
<td>05-November-2014</td>
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4. Are you the corresponding author? [ ] Yes [ ] No

<table>
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<th>Corresponding Author’s Name</th>
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<tr>
<td>Richard Iorio</td>
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</table>

5. Manuscript Title
A Perioperative Orthopaedic Surgical Home (POSH) Readmission Scoring Tool to Manage Modifiable Risk Factors Prior to Hip and Knee Arthroplasty

6. Manuscript Identifying Number (if you know it)

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Section 6. Disclosure Statement

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Dr. Bosco has nothing to disclose.

Evaluation and Feedback

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<td>Sreevathsa</td>
<td>Boraiah</td>
<td>05-November-2014</td>
</tr>
</tbody>
</table>

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

Corresponding Author's Name: Richard Iorio

5. Manuscript Title  
   A Perioperative Orthopaedic Surgical Home (POSH) Readmission Scoring Tool to Manage Modifiable Risk Factors Prior to Hip and Knee Arthroplasty

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Dr. Boraiah has nothing to disclose.

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

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

3. **Date**
   - 05-November-2014

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

5. **Manuscript Title**
   - A Perioperative Orthopaedic Surgical Home (POSH) Readmission Scoring Tool to Manage Modifiable Risk Factors Prior to Hip and Knee Arthroplasty

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Dr. Inneh has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  Richard
2. Surname (Last Name)  Iorio
3. Date  05-November-2014
4. Are you the corresponding author?  ✔ Yes  No
5. Manuscript Title
A Perioperative Orthopaedic Surgical Home (POSH) Readmission Scoring Tool to Manage Modifiable Risk Factors Prior to Hip and Knee Arthroplasty
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Dr. Iorio reports personal fees from IMDS Kyocera, outside the submitted work.

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Meftah
ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name)  
   Morteza

2. Surname (Last Name)  
   Meftah

3. Date  
   05-November-2014

4. Are you the corresponding author?  
   No

   Corresponding Author’s Name  
   Richard Iorio

5. Manuscript Title  
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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. Meftah reports In addition, Dr. Meftah has a patent US 20130046310 issued.

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Royalties: Funds are coming in to you or your institution due to your patent
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Section 1. Identifying Information

1. Given Name (First Name) Parthiv
2. Surname (Last Name) Rathod
3. Date 05-November-2014
4. Are you the corresponding author? Yes ☑ No
5. Manuscript Title A Perioperative Orthopaedic Surgical Home (POSH) Readmission Scoring Tool to Manage Modifiable Risk Factors Prior to Hip and Knee Arthroplasty
6. Manuscript Identifying Number (if you know it)

Corresponding Author’s Name Richard Iorio

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

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Dr. Rathod has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Philip

2. Surname (Last Name)  
   Band

3. Date  
   05-November-2014

4. Are you the corresponding author?  
   Yes [ ] No [X]
   Corresponding Author’s Name  
   Richard Iorio

5. Manuscript Title  
   A Perioperative Orthopaedic Surgical Home (POSH) Readmission Scoring Tool to Manage Modifiable Risk Factors Prior to Hip and Knee Arthroplasty

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Are there any relevant conflicts of interest?  
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1. Given Name (First Name)  
   LiJin

2. Surname (Last Name)  
   Joo

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