ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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1. Identifying information.

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5. Relationships not covered above.

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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)  Manuel J
2. Surname (Last Name)  Pellegrini
3. Date  16-March-2015
4. Are you the corresponding author?  Yes ☑ No
5. Manuscript Title  Tibiotalar arthrodesis conversion to Total Ankle Arthroplasty
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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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

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Dr. Pellegrini reports other from Synthes, other from Promedon (Arthrex), outside the submitted work.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)  
   Samuel

2. Surname (Last Name)  
   Adams

3. Date  
   19-March-2015

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

   Corresponding Author’s Name  
   Manuel Pellegrini, MD

5. Manuscript Title  
   Tibialtal arthrodesis conversion to Total Ankle Arthroplasty

6. Manuscript Identifying Number (if you know it)

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Dr. Adams reports grants from OREF, personal fees from Stryker, personal fees from rti Surgical, personal fees from Medshape, personal fees from Harvest, outside the submitted work; .

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

1. Given Name (First Name)  
James

2. Surname (Last Name)  
DeOrio

3. Date  
18-March-2015

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

Corresponding Author’s Name  
Manuel Pellegrini, MD

5. Manuscript Title  
Tibiotalar arthrodesis conversion to Total Ankle Arthroplasty

6. Manuscript Identifying Number (if you know it)

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Section 1. Identifying Information

1. Given Name (First Name)  Mark
2. Surname (Last Name)  Easley
3. Date  16-March-2015
4. Are you the corresponding author?  Yes  No
5. Manuscript Title
   Tibiotalar arthrodesis conversion to Total Ankle Arthroplasty

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- **Royalties**: Funds are coming in to you or your institution due to your patent

nunley
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   James

2. Surname (Last Name)  
nunley

3. Date  
   17-March-2015

4. Are you the corresponding author?  
   Yes ☑️  No

Corresponding Author’s Name  
manuel pellegrini

5. Manuscript Title  
   Tibiotalar arthrodesis conversion to Total Ankle Arthroplasty

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

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

If yes, please fill out the appropriate information below.

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<th>Name of Entity</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 ☑️  No
ICMJE Form for Disclosure of Potential Conflicts of Interest

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ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 1. Identifying Information**

1. Given Name (First Name)  
   Robin

2. Surname (Last Name)  
   Queen

3. Date  
   17-March-2015

4. Are you the corresponding author?  
   [ ] Yes  
   [x] No  
   Corresponding Author’s Name  
   Manuel Pellegrini

5. Manuscript Title  
   Tibialtalar arthrodesis conversion to Total Ankle Arthroplasty

6. Manuscript Identifying Number (if you know it)

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

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Dr. Queen reports grants from Stryker, grants from DonJoy, personal fees from Quest Diagnostics, outside the submitted work.

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Schiff
ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 1. Identifying Information**

1. Given Name (First Name)  
   Adam  

2. Surname (Last Name)  
   Schiff  

3. Date  
   

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

   Corresponding Author’s Name  
   Manuel Pellegrini  

5. Manuscript Title  
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