ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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1. Identifying information.
2. The work under consideration for publication.
   
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   This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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<table>
<thead>
<tr>
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<th>3. Date</th>
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<tr>
<td>Aaron</td>
<td>Bois</td>
<td>06-October-2014</td>
</tr>
</tbody>
</table>

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

5. Manuscript Title
   Humeral Head Arthroplasty and Meniscal Allograft Resurfacing of the Glenoid: A Concise Follow-up of a Previous Report and Survivorship Analysis*

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. Bois has nothing to disclose.

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**Section 1. Identifying Information**

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

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

3. **Date**
   07-October-2014

4. **Are you the corresponding author?**
   ☑ No

5. **Manuscript Title**
   Humeral Head Arthroplasty and Meniscal Allograft Resurfacing of the Glenoid: A Concise Follow-up of a Previous Report and Survivorship Analysis

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

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Dr. Somerson has nothing to disclose.

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1. Given Name (First Name)  
   Ian  
2. Surname (Last Name)  
   Whitney  
3. Date  
   07-October-2014  
4. Are you the corresponding author?  
   □ Yes  
   ✔ No  
   Corresponding Author’s Name  
   Aaron Bois  
5. Manuscript Title  
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1. Given Name (First Name)  
michael

2. Surname (Last Name)  
wirth

3. Date  
08-October-2014

4. Are you the corresponding author?  
Yes  ✔  No

Corresponding Author’s Name  
aaron bois

5. Manuscript Title  
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