ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Andrew

2. Surname (Last Name)  
   Tokumi

3. Date  
   09-October-2014

4. Are you the corresponding author?  
   □ Yes  ✔ No
   Corresponding Author’s Name  
   Charles S. Day

5. Manuscript Title  
   Does an Internet Directive Enhance the Doctor-Patient Visit? A Prospective Randomized Study for Patients with Carpal Tunnel Syndrome

6. Manuscript Identifying Number (if you know it)  
   JBJS-D-14-00741R1

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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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Mr. Tokumi has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
Khin-Kyemon

2. Surname (Last Name)  
Aung

3. Date  
14-October-2014

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

Corresponding Author’s Name
Charles S. Day

5. Manuscript Title  
Does an Internet Directive Enhance the Doctor-Patient Visit? A Prospective Randomized Study for Patients with Carpal Tunnel Syndrome

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Dr. Aung has nothing to disclose.

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Phoebe

2. Surname (Last Name)  
   Kuo

3. Date  
   09-October-2014

4. Are you the corresponding author?  
   [ ] Yes  [x] No  
   Corresponding Author’s Name  
   Charles S. Day

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

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**Section 1. Identifying Information**

1. Given Name (First Name)  
Wei Kang

2. Surname (Last Name)  
Wu

3. Date  
09-October-2014

4. Are you the corresponding author?  
Yes  ✔  No

5. Manuscript Title  
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Charles S.
2. Surname (Last Name)  Day
3. Date  05-June-2014
4. Are you the corresponding author?  ✔ Yes  ☐ No

5. Manuscript Title  Doctor-patient Visit Versus Internet Directive in Carpal Tunnel Syndrome Patients: A Prospective Randomized Study
6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest?  No

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Dr. Day has nothing to disclose.

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