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.

1. Identifying information.

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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) Abtin
2. Surname (Last Name) Alvand
3. Date 17-September-2014

4. Are you the corresponding author? ☑ No

Corresponding Author’s Name
Jonathan Rees

5. Manuscript Title
Assessing arthroscopic skills using wireless elbow-worn motion sensors.

6. Manuscript Identifying Number (if you know it)

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Dr. Alvand has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
Caroline  

2. Surname (Last Name)  
Hargrove  

3. Date  
15-September-2014  

4. Are you the corresponding author?  
☑ No  

Corresponding Author’s Name  
Jonathan Rees  

5. Manuscript Title  
Assessing arthroscopic skills using wireless elbow-worn motion sensors.  

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Dr. Hargrove has nothing to disclose.

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<td>PAUL</td>
<td>GUYVER</td>
<td>14-September-2014</td>
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<th>4. Are you the corresponding author?</th>
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Corresponding Author’s Name: Jonathan Rees

5. Manuscript Title
Assessing arthroscopic skills using wireless elbow-worn motion sensors.

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Mr. GUYVER has nothing to disclose.

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Rees
ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 1. Identifying Information**

1. Given Name (First Name)  
   Jonathan

2. Surname (Last Name)  
   Rees

3. Date  
   17-September-2014

4. Are you the corresponding author?  
   ✔ Yes  
   No

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

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Section 1. Identifying Information

1. Given Name (First Name)  Georgina
2. Surname (Last Name)  Kirby
3. Date  15-September-2014
4. Are you the corresponding author?  Yes  ☑  No
   Corresponding Author’s Name  Jonathan Rees
5. Manuscript Title
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<td>McLaren Applied Technologies</td>
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<td>Fully sponsored this Masters programme</td>
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Miss. Kirby reports grants from McLaren Applied Technologies, during the conduct of the study.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
   Guang-Zhong

2. Surname (Last Name)  
   Yang

3. Date  
   17-September-2014

4. Are you the corresponding author?  
   [ ] Yes  [X] No

   Corresponding Author’s Name  
   Jonathan Rees

5. Manuscript Title  
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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.)?

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**Section 6. Disclosure Statement**

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Prof. Yang has nothing to disclose.

**Evaluation and Feedback**

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Instructions

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<th>1. Given Name (First Name)</th>
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<td>4. Are you the corresponding author?</td>
<td>Yes ✔ No</td>
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<tr>
<td>Corresponding Author’s Name</td>
<td>Jonathan Rees</td>
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<td>5. Manuscript Title</td>
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<tr>
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<td>Strickland</td>
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