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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<tr>
<td>Michael</td>
<td>Guss</td>
<td>04-January-2015</td>
</tr>
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</table>

4. Are you the corresponding author?  
   - Yes  
   - No  
   
   Corresponding Author’s Name
   Carlos Uquillas

5. Manuscript Title
   Everything Achilles: Knowledge Update and Current Concepts in Management

6. Manuscript Identifying Number (if you know it)

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Dr. Guss has nothing to disclose.

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<tr>
<td>Laith</td>
<td>Jazrawi</td>
<td>04-January-2015</td>
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4. Are you the corresponding author?  
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5. Manuscript Title  
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Dr. Jazrawi has nothing to disclose.

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<tr>
<td>Devon</td>
<td>Ryan</td>
<td>04-January-2015</td>
</tr>
</tbody>
</table>

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

5. Manuscript Title  
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Devon Ryan has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  Eric
2. Surname (Last Name)  Strauss
3. Date  04-January-2015
4. Are you the corresponding author?  Yes  ✔  No

Corresponding Author’s Name  Carlos Uquillas

5. Manuscript Title  Everything Achilles: Knowledge Update and Current Concepts in Management

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<tr>
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<td>04-January-2015</td>
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