ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name)  
   Aaron
2. Surname (Last Name)  
   Krych
3. Date  
   19-May-2017
4. Are you the corresponding author?  
   ✔ Yes  ❌ No
5. Manuscript Title  
   Current Concepts in Meniscus Repair: Reconsidering Indications, Techniques, and Biologic Augmentation
6. Manuscript Identifying Number (if you know it)

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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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Dr. Krych reports personal fees from Arthrex Inc, grants from Arthritis Foundation, other from International Cartilage Repair Society, during the conduct of the study; other from AJSM, grants from Ceterix, grants from Histogenics, other from International Society of Arthroscopy, Knee Surgery, and Orthopaedic Sports Medicine, outside the submitted work;
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Section 1. Identifying Information

1. Given Name (First Name)  
   Nicholas

2. Surname (Last Name)  
   Sgaglione

3. Date  
   19-May-2017

4. Are you the corresponding author?  
   ✔ No

Corresponding Author’s Name  
   Aaron J. Krych

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Dr. Sgaglione reports personal fees from Biomet, during the conduct of the study; other from AANA, other from Sports Medicine Arthroscopy Review, personal fees from Ivy Sports Medicine, other from Wolters Kluwer Health, outside the submitted work; .

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Nakamura
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Section 1. Identifying Information

1. Given Name (First Name) Norimasa
2. Surname (Last Name) Nakamura
3. Date 19-May-2017
4. Are you the corresponding author? ☑ No

Corresponding Author’s Name
Aaron J. Krych

5. Manuscript Title
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   Robert

2. Surname (Last Name)  
   Laprade

3. Date  
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<th>Non-Financial Support</th>
<th>Other</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Smith &amp; Nephew</td>
<td>✔</td>
<td>✔</td>
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</tbody>
</table>

**Section 4. Intellectual Property -- Patents & Copyrights**

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
☐ Yes  ✔ No

**Section 5. Relationships not covered above**

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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✔ No other relationships/conditions/circumstances that present a potential conflict of interest

At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

**Section 6. Disclosure Statement**

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

Dr. Laprade reports personal fees from Arthrex Inc, grants and personal fees from Ossur, grants and personal fees from Smith and Nephew, during the conduct of the study; other from AJSM, grants and other from AOSSM, grants and other from Knee Surgery, Sports Traumatology, Arthroscopy, other from International Society of Arthroscopy, Knee Surgery, and Orthopaedic Sports Medicine, grants from Linvatec, outside the submitted work.

**Evaluation and Feedback**

Please visit [http://www.icmje.org/cgi-bin/feedback](http://www.icmje.org/cgi-bin/feedback) to provide feedback on your experience with completing this form.
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.

2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking “No” means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check “Yes”.

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Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work’s sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.


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

5. Relationships not covered above.

Use this section to report other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work.

Definitions.

Entity: government agency, foundation, commercial sponsor, academic institution, etc.
Grant: A grant from an entity, generally [but not always] paid to your organization
Personal Fees: Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations
Non-Financial Support: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.
Other: Anything not covered under the previous three boxes
Pending: The patent has been filed but not issued
Issued: The patent has been issued by the agency
Licensed: The patent has been licensed to an entity, whether earning royalties or not
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)  Jarret
2. Surname (Last Name)  Woodmass
3. Date  21-February-2017
4. Are you the corresponding author?  Yes  No  ✔
   Corresponding Author’s Name  Aaron J. Krych
5. Manuscript Title
   Current Concepts in Meniscus Repair: Reconsidering Indications, Techniques, and Biologic Augmentation
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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Are there any relevant conflicts of interest?  Yes  No  ✔

Section 4. Intellectual Property -- Patents & Copyrights

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Section 5. Relationships not covered above

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☑ No other relationships/conditions/circumstances that present a potential conflict of interest

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Dr. Woodmass has nothing to disclose.

Evaluation and Feedback

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