ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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1. Identifying information.

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# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Section 1. Identifying Information

1. **Given Name (First Name)**
   - Peter

2. **Surname (Last Name)**
   - Derman

3. **Date**
   - 17-February-2016

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

5. **Manuscript Title**
   - An Initiative to Standardize the Identification of and Acute Response to Postoperative Lower-Extremity Neurological Deficits: Effects on Provider Knowledge, Confidence, and Communication Skills

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

## Section 2. The Work Under Consideration for Publication

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- **Are there any relevant conflicts of interest?** Yes

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

- **Do you have any patents, whether planned, pending or issued, broadly relevant to the work?** Yes

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Derman
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Dr. Derman reports other from The Richard Menschel Foundation, 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) Charles
2. Surname (Last Name) Cornell
3. Date 29-June-2016
4. Are you the corresponding author? Yes
5. Manuscript Title
An Initiative to Standardize the Identification of and Acute Response to Postoperative Lower-Extremity Neurological Deficits: Effects on Provider Knowledge, Confidence, and Communication Skills
6. Manuscript Identifying Number (if you know it) JBJS-D-16-00303

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Karla  

2. Surname (Last Name)  
   Felix  

3. Date  
   17-February-2016  

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

5. Manuscript Title  
   An Initiative to Standardize the Identification of and Acute Response to Postoperative Lower-Extremity Neurological Deficits: Effects on Provider Knowledge, Confidence, and Communication Skills  

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Matthew
2. Surname (Last Name)  Garner
3. Date  18-February-2016
4. Are you the corresponding author?  Yes  ✔  No
5. Manuscript Title
An Initiative to Standardize the Identification of and Acute Response to Postoperative Lower-Extremity Neurological Deficits: Effects on Provider Knowledge, Confidence, and Communication Skills
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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Allison

2. Surname (Last Name)  
   Goldberg

3. Date  
   19-February-2016

4. Are you the corresponding author?  
   No

   Corresponding Author’s Name  
   Karla Felix, PhD

5. Manuscript Title  
   An Initiative to Standardize the Identification of and Acute Response to Postoperative Lower-Extremity Neurological Deficits: Effects on Provider Knowledge, Confidence, and Communication Skills

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Are there any relevant conflicts of interest?  
   Yes

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
   Yes
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### Section 1. Identifying Information

1. Given Name (First Name)  
   Sravisht
2. Surname (Last Name)  
   Iyer
3. Date  
   17-February-2016
4. Are you the corresponding author?  
   Yes ☑ No
5. Manuscript Title  
   An Initiative to Standardize the Identification of and Acute Response to Postoperative Lower-Extremity Neurological Deficits: Effects on Provider Knowledge, Confidence, and Communication Skills
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Are there any relevant conflicts of interest?  
Yes ☑ No

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Titilayo
2. Surname (Last Name) Ologhobo
3. Date 22-February-2016
4. Are you the corresponding author? Yes No
   Corresponding Author’s Name Karla Felix, PhD
5. Manuscript Title
   An Initiative to Standardize the Identification of and Acute Response to Postoperative Lower-Extremity Neurological Deficits: Effects on Provider Knowledge, Confidence, and Communication Skills
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Section 1. Identifying Information

1. Given Name (First Name)  
   Steven

2. Surname (Last Name)  
   Orr

3. Date  
   19-February-2016

4. Are you the corresponding author?  
   Yes ✗

5. Manuscript Title  
   An Initiative to Standardize the Identification of and Acute Response to Postoperative Lower-Extremity Neurological Deficits: Effects on Provider Knowledge, Confidence, and Communication Skills

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ICMJ Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Laura
2. Surname (Last Name)  Robbins
3. Date  22-February-2016
4. Are you the corresponding author?  Yes ✔ No
5. Manuscript Title
An Initiative to Standardize the Identification of and Acute Response to Postoperative Lower-Extremity Neurological Deficits: Effects on Provider Knowledge, Confidence, and Communication Skills
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## Section 1. Identifying Information

1. **Given Name (First Name)**
   - Minlun

2. **Surname (Last Name)**
   - Wu

3. **Date**
   - 16-September-2016

4. **Are you the corresponding author?**
   - Yes

5. **Manuscript Title**
   - An Initiative to Standardize the Identification of and Acute Response to Postoperative Lower-Extremity Neurological Deficits: Effects on Provider Knowledge, Confidence, and Communication Skills

6. **Manuscript Identifying Number (if you know it)**
   - JBJS-D-16-00303

## 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.)?

Are there any relevant conflicts of interest? ✔ Yes

If yes, please fill out the appropriate information below. If you have more than one entity press the “ADD” button to add a row. Excess rows can be removed by pressing the “X” button.

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<td>The Richard Menschel Foundation</td>
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<td>Foundation support helped to partially fund salary.</td>
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Dr. Wu reports other from The Richard Menschel Foundation, during the conduct of the study.

Evaluation and Feedback

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