

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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4. Intellectual Property.

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

5. Relationships not covered above.

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Entity: government agency, foundation, commercial sponsor, academic institution, etc.

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Other: Anything not covered under the previous three boxes

Pending: The patent has been filed but not issued

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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)
Kevin

2. Surname (Last Name)
Bozic

3. Date
24-October-2016

4. Are you the corresponding author? Yes No
Corresponding Author's Name
Joan E. Bechtold

5. Manuscript Title
The Pursuit of Scholarship – Why We Should Care About Resident Research and Best Practices to Achieve Maximal Impact

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 No

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Agency for Healthcare Research and Quality (AHRQ)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Research Support
California Public Employees' Retirement System (CalPERS)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Research Support
Harvard Business School	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Visiting Scholar
Centers for Medicare and Medicaid Services	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consultant
American Joint Replacement Registry (AJRR)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Governance/Leadership Role (Board of Directors)
National Institutes for Health (NIH)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Research Support

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Institute for Healthcare Improvement	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consultant
American Academy of Orthopaedic Surgeons (AAOS)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Governance/Leadership Role
American Association of Hip and Knee Surgeons (AAHKS)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Governance/Leadership Role
Orthopaedic Research and Education Foundation (OREF)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Governance/Leadership Role

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. Bozic reports grants from Agency for Healthcare Research and Quality (AHRQ), grants from California Public Employees' Retirement System (CalPERS), personal fees from Harvard Business School, personal fees from Centers for Medicare and Medicaid Services, other from American Joint Replacement Registry (AJRR), grants from National Institutes for Health (NIH), personal fees from Institute for Healthcare Improvement, other from American Academy of Orthopaedic Surgeons (AAOS), other from American Association of Hip and Knee Surgeons (AAHKS), other from Orthopaedic Research and Education Foundation (OREF), outside the submitted work; .

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Section 1. Identifying Information

1. Given Name (First Name) David	2. Surname (Last Name) Polly	3. Date 01-October-2016
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Joan E. Bechtold
5. Manuscript Title The Pursuit of Scholarship – Why We Should Care About Resident Research and Best Practices to Achieve Maximal Impact		
6. Manuscript Identifying Number (if you know it) 		

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Scoliosis Research Society Board of Directors, AAOS Board of Councilors, AAOS Board of Specialty Societies and the Minnesota Orthopaedic Society Board of Directors

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Dr. Polly reports no industry conflicts. He is associated with the Scoliosis Research Society Board of Directors, AAOS Board of Councilors, AAOS Board of Specialty Societies and the Minnesota Orthopaedic Society Board of Directors.

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Section 1. Identifying Information

1. Given Name (First Name) Stephen	2. Surname (Last Name) Albanese	3. Date 01-October-2016
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Joan E. Bechtold
5. Manuscript Title The Pursuit of Scholarship – Why We Should Care About Resident Research and Best Practices to Achieve Maximal Impact		
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Dr. Albanese has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)

Joan

2. Surname (Last Name)

Bechtold

3. Date

01-October-2016

4. Are you the corresponding author?

Yes No

5. Manuscript Title

The Pursuit of Scholarship – Why We Should Care About Resident Research and Best Practices to Achieve Maximal Impact

6. Manuscript Identifying Number (if you know it)

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1. Given Name (First Name) Joseph	2. Surname (Last Name) Buckwalter	3. Date 01-October-2016
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Joan E. Bechtold
5. Manuscript Title The Pursuit of Scholarship – Why We Should Care About Resident Research and Best Practices to Achieve Maximal Impact		
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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)

Pugely

3. Date

01-October-2016

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

Joan E. Bechtold

5. Manuscript Title

The Pursuit of Scholarship – Why We Should Care About Resident Research and Best Practices to Achieve Maximal Impact

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 No

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Are there any relevant conflicts of interest? Yes No

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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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Brian	2. Surname (Last Name) Snyder	3. Date 01-October-2016
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Joan E. Bechtold
5. Manuscript Title The Pursuit of Scholarship – Why We Should Care About Resident Research and Best Practices to Achieve Maximal Impact		
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.)?

Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

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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ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name) Stuart	2. Surname (Last Name) Weinstein	3. Date 01-October-2016
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Joan E. Bechtold
5. Manuscript Title The Pursuit of Scholarship – Why We Should Care About Resident Research and Best Practices to Achieve Maximal Impact		
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ICMJE Form for Disclosure of Potential Conflicts of Interest

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