

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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#### 1. Identifying information.

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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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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Bran	2. Surname (Last Name) Sivakumar	3. Date 26-January-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name George Murphy
5. Manuscript Title Correction of "wrist" deformity in Radial Dysplasia: a systematic review and meta-analysis.		
6. Manuscript Identifying Number (if you know it) JBJS-D-17-00164		

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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

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

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Dr. Sivakumar has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name)  
George

2. Surname (Last Name)  
Murphy

3. Date  
16-January-2017

4. Are you the corresponding author?  Yes  No

5. Manuscript Title  
Correction of "wrist" deformity in Radial Dysplasia: a systematic review and meta-analysis.

6. Manuscript Identifying Number (if you know it)  
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Are there any relevant conflicts of interest?  Yes  No

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.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
British Society of Surgeons of the Hand	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PhD fellowship

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Dr. Murphy reports grants from British Society of Surgeons of the Hand, during the conduct of the study; .

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Gill

2. Surname (Last Name)  
Smith

3. Date  
26-January-2017

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Yes  No

Corresponding Author's Name  
George Murphy

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

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Malcolm

2. Surname (Last Name)  
Logan

3. Date  
16-January-2017

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Corresponding Author's Name  
George Murphy

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Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Medical Research Council (UK)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Prof. Logan reports grants from Medical Research Council (UK), during the conduct of the study.

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