ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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<tr>
<td>2. Surname (Last Name)</td>
<td>Garabekyan</td>
</tr>
<tr>
<td>3. Date</td>
<td>13-April-2017</td>
</tr>
</tbody>
</table>

4. Are you the corresponding author? [ ] Yes [✓] No

Corresponding Author’s Name: Omer Mei-Dan

5. Manuscript Title
The Anteroposterior Pelvis Radiograph: Acetabular and Femoral Measurements and Relation to Hip Pathologies

6. Manuscript Identifying Number (if you know it)

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Dr. Garabekyan has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name)  
   Mary

2. Surname (Last Name)  
   Jesse

3. Date  
   13-April-2017

4. Are you the corresponding author?  
   ☑ No

5. Manuscript Title  
   The Anteroposterior Pelvis Radiograph: Acetabular and Femoral Measurements and Relation to Hip Pathologies

6. Manuscript Identifying Number (if you know it)

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Dr. Jesse has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  Matthew
2. Surname (Last Name)  Kraeutler
3. Date  13-April-2017
4. Are you the corresponding author?  Yes  ☑ No
5. Manuscript Title
The Anteroposterior Pelvis Radiograph: Acetabular and Femoral Measurements and Relation to Hip Pathologies
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Dr. Kraeutler has nothing to disclose.

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<tr>
<td>2. Surname (Last Name)</td>
<td>Mei-Dan</td>
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4. Are you the corresponding author?  
   ✔ Yes  
   ☐ No

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Dr. Mei-Dan has nothing to disclose.

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1. Given Name (First Name)  
Linnea

2. Surname (Last Name)  
Welton

3. Date  
13-April-2017

4. Are you the corresponding author?  
☐ Yes  ✧ No

Corresponding Author’s Name  
Omer Mei-Dan

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Dr. Welton has nothing to disclose.

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