ICMJE Form for Disclosure of Potential Conflicts of Interest

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) 
Chong Hyuk

2. Surname (Last Name) 
Choi

3. Date 
19-June-2017

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

Corresponding Author’s Name: Min Jung

5. Manuscript Title
Minimum Two-Year Follow-up of Anterior Cruciate Ligament Reconstruction in Patients with Generalized Joint Laxity

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest?  ☐ Yes  ✔ No

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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. Choi has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Haemosu
2. Surname (Last Name) An
3. Date 19-June-2017
4. Are you the corresponding author? Yes ☐ No ☑
   Corresponding Author’s Name Min Jung
5. Manuscript Title Minimum Two-Year Follow-up of Anterior Cruciate Ligament Reconstruction in Patients with Generalized Joint Laxity
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Dr. An has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  Min
2. Surname (Last Name)  Jung
3. Date  19-June-2017
4. Are you the corresponding author?  ✔ Yes  No
5. Manuscript Title
Minimum Two-Year Follow-up of Anterior Cruciate Ligament Reconstruction in Patients with Generalized Joint Laxity
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1. Given Name (First Name) Su-Keon
2. Surname (Last Name) Lee
3. Date 19-June-2017

4. Are you the corresponding author? ☑ No
   Corresponding Author’s Name Min Jung

5. Manuscript Title
   Minimum Two-Year Follow-up of Anterior Cruciate Ligament Reconstruction in Patients with Generalized Joint Laxity

6. Manuscript Identifying Number (if you know it)

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## Section 1. Identifying Information

1. Given Name (First Name)  
   Sung-Jae

2. Surname (Last Name)  
   Kim

3. Date  
   19-June-2017

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

   Corresponding Author’s Name  
   Min Jung

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- **Non-Financial Support:** Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.
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1. Given Name (First Name)  
Wonyong

2. Surname (Last Name)  
Lee

3. Date  
19-June-2017

4. Are you the corresponding author?  
Yes ✔ No

5. Manuscript Title  
Minimum Two-Year Follow-up of Anterior Cruciate Ligament Reconstruction in Patients with Generalized Joint Laxity

6. Manuscript Identifying Number (if you know it)

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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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Dr. Lee has nothing to disclose.

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