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1. **Identifying information.**

2. **The work under consideration for publication.**

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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.**

   Use this section to report other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work.

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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)  
   Nicholas

2. Surname (Last Name)  
   Bedard

3. Date  
   20-November-2017

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

   Corresponding Author’s Name  
   Rafael Sierra

5. Manuscript Title  
   Opioids after Orthopaedic Surgery – There is a need for universal prescribing recommendations

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?  
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   ✔ No
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Dr. Bedard has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Tad
2. Surname (Last Name) Mabry
3. Date 22-November-2017
4. Are you the corresponding author? ☑ No

5. Manuscript Title
Opioids after Orthopaedic Surgery – There is a need for universal prescribing recommendations

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? ☑ No

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Dr. Mabry has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Rafael

2. Surname (Last Name)  
   Sierra

3. Date  
   06-November-2017

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

5. Manuscript Title  
   Opioids after Orthopaedic Surgery – There is a need for universal prescribing recommendations

6. Manuscript Identifying Number (if you know it)

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If yes, please fill out the appropriate information below.

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<th>Non-Financial Support?</th>
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Dr. Sierra reports other from Zimmer Biomet, outside the submitted work;

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