

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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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.

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#### Definitions.

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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)  
Young-Jo

2. Surname (Last Name)  
Kim

3. Date  
31-July-2017

4. Are you the corresponding author?  Yes  No  
Corresponding Author's Name  
Eduardo Novais

5. Manuscript Title  
Mid-Term Results of Periacetabular Osteotomy for The Treatment of Hip Dysplasia in Down Syndrome: A Five-Year Minimum Follow-up

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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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 |
|-----------------|--------------------------|-------------------------------------|--------------------------|--------------------------|----------|
| Orthopediatrics | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |

### 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. Kim reports personal fees from Orthopediatrics, outside the submitted work; .

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Daniel

2. Surname (Last Name)  
Maranho

3. Date  
31-July-2017

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Eduardo Novais

5. Manuscript Title  
Mid-Term Results of Periacetabular Osteotomy for The Treatment of Hip Dysplasia in Down Syndrome: A Five-Year Minimum Follow-up

6. Manuscript Identifying Number (if you know it)

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Grant No. 2016/04376–3, São Paulo Research Foundation (FAPESP)

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Dr. Maranhão reports the Grant No. 2016/04376–3, São Paulo Research Foundation (FAPESP).

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Michael

2. Surname (Last Name)

Millis

3. Date

31-July-2017

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

Eduardo Novais

5. Manuscript Title

Mid-Term Results of Periacetabular Osteotomy for The Treatment of Hip Dysplasia in Down Syndrome: A Five-Year Minimum Follow-up

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Dr. Millis has nothing to disclose.

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1. Given Name (First Name)  
Eduardo

2. Surname (Last Name)  
Novais

3. Date  
31-July-2017

4. Are you the corresponding author?  Yes  No

5. Manuscript Title  
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6. Manuscript Identifying Number (if you know it)

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Dr. Novais has nothing to disclose.

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### Section 1. Identifying Information

|  |   |   |
|--|---|---|
| 1. Given Name (First Name)<br>Kathryn  | 2. Surname (Last Name)<br>Williams                                  | 3. Date<br>31-July-2017                       |
| 4. Are you the corresponding author?   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name<br>Eduardo Novais |
| 5. Manuscript Title<br>Mid-Term Results of Periacetabular Osteotomy for The Treatment of Hip Dysplasia in Down Syndrome: A Five-Year Minimum Follow-up |   |   |
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Dr. Williams has nothing to disclose.

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