ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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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)**
   Ramona

2. **Surname (Last Name)**
   Reisdorf

3. **Date**
   19-July-2017

4. **Are you the corresponding author?**
   - Yes ✔
   - No 

5. **Manuscript Title**
   Comparison of Autograft and Allograft for Flexor Tendon Reconstruction With Surface Modification: A Canine In Vivo Model

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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- Yes 
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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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Section 5. Relationships not covered above

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Section 6. Disclosure Statement

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Dr. Reisdorf has nothing to disclose.

Evaluation and Feedback

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Thoreson
ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

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<th>1. Given Name (First Name)</th>
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<tr>
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<tr>
<td>4. Are you the corresponding author?</td>
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<tr>
<td>Corresponding Author’s Name</td>
<td>Chunfeng Zhao</td>
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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.)? Are there any relevant conflicts of interest? Yes ☐ No ☑

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Mr. Thoreson has nothing to disclose.

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<td>2. Surname (Last Name)</td>
<td>Wei</td>
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Dr. Wei has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Peter

2. Surname (Last Name)  
   Amadio

3. Date  
   18-July-2017

4. Are you the corresponding author?  
   No

   ✔

   Corresponding Author’s Name  
   Chunfeng Zhao

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Are there any relevant conflicts of interest?  
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   No

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Dr. Amadio reports grants from National Institute of Health (NIH)/National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS) (AR 057745), grants from Musculoskeletal Transplant Foundation, during the conduct of the study.

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Section 1. Identifying Information

1. Given Name (First Name)  
Kai-Nan

2. Surname (Last Name)  
An

3. Date  
20-July-2017

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

Corresponding Author’s Name  
Dr. Chunfeng Zhao

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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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Section 1. Identifying Information

1. Given Name (First Name) Chunfeng
2. Surname (Last Name) Zhao
3. Date 19-July-2017
4. Are you the corresponding author? Yes ✔ No
5. Manuscript Title
Comparison of Autograft and Allograft for Flexor Tendon Reconstruction With Surface Modification: A Canine In Vivo Model
6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes ✔ No
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**Other:** Anything not covered under the previous three boxes

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**Licensed:** The patent has been licensed to an entity, whether earning royalties or not

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. **Given Name (First Name)**
   - Steven

2. **Surname (Last Name)**
   - Moran

3. **Date**
   - 19-July-2017

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

   **Corresponding Author’s Name**
   - Chunfeng Zhao, MD

5. **Manuscript Title**
   - Comparison of Autograft and Allograft for Flexor Tendon Reconstruction With Surface Modification: A Canine In Vivo Model

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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Moran
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1. **Given Name (First Name)**
   - Gregory

2. **Surname (Last Name)**
   - Jay

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   - 19-July-2017

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