ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically.

1. Identifying information.
2. The work under consideration for publication.
3. Relevant financial activities outside the submitted work.
5. Relationships not covered above.
6. Definitions.

**Entity:** government agency, foundation, commercial sponsor, academic institution, etc.

**Grant:** A grant from an entity, generally [but not always] paid to your organization

**Personal Fees:** Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

**Non-Financial Support:** Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

**Other:** Anything not covered under the previous three boxes

**Pending:** The patent has been filed but not issued

**Issued:** The patent has been issued by the agency

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

**Royalties:** Funds are coming in to you or your institution due to your patent

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1. **Identifying information.**

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

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## Section 1. Identifying Information

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<tr>
<td>Elizabeth</td>
<td>Scott</td>
<td>03/25/2018</td>
</tr>
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4. Are you the corresponding author? [ ] Yes  ✔ No

Corresponding Author’s Name
Michael Willey

5. Manuscript Title
Unaddressed Cam Deformity is associated with elevated joint contact stress after periacetabular osteotomy

6. Manuscript Identifying Number (if you know it)
JBJS-D-17-01631R1

## Section 2. The Work Under Consideration for Publication

Did you or your institution at any time

Are there any relevant conflicts of interest? [ ] Yes  ✔ No

## Section 3. Relevant financial activities outside the submitted work.

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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
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Scott has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name) Michael
2. Surname (Last Name) Willey
3. Date 03/25/2018
4. Are you the corresponding author? Yes

5. Manuscript Title
Unaddressed Cam Deformity is associated with elevated joint contact stress after periacetabular osteotomy

6. Manuscript Identifying Number (if you know it)
JBJS-D-17-01631R1

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Willey
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Dr. Willey has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Robert
2. Surname (Last Name)  Westermann
3. Date  03/25/2018

4. Are you the corresponding author?  Yes  No  ✔

5. Manuscript Title
Unaddressed Cam Deformity is associated with elevated joint contact stress after periacetabular osteotomy

6. Manuscript Identifying Number (if you know it)
JBJS-D-17-01631R1

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Dr. Westermann has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Natalie
2. Surname (Last Name)  Glass
3. Date  03/25/2018

4. Are you the corresponding author?  No

Corresponding Author’s Name  Michael Willey

5. Manuscript Title
Unaddressed Cam Deformity is associated with elevated joint contact stress after periacetabular osteotomy

6. Manuscript Identifying Number (if you know it)
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Dr. Glass has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Jessica
2. Surname (Last Name) Goetz
3. Date 21-December-2017
4. Are you the corresponding author? Yes No
   ✔
   Corresponding Author’s Name Michael Willey
5. Manuscript Title
Unaddressed Cam Deformity is associated with elevated joint contact stress after periacetabular osteotomy
6. Manuscript Identifying Number (if you know it) JBJS-D-17-01631R1

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No
   ✔
If yes, please fill out the appropriate information below. If you have more than one entity press the “ADD” button to add a row. Excess rows can be removed by pressing the "X" button.

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Dr. Goetz reports grants from Orthopaedic Research and Education Foundation, during the conduct of the study.

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<tbody>
<tr>
<td>Holly</td>
<td>Thomas-Aitken</td>
<td>03/25/2018</td>
</tr>
</tbody>
</table>

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

Corresponding Author’s Name

Michael Willey

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Ms. Thomas-Aitken has nothing to disclose.

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