

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. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

1. Identifying information.

2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

3. Relevant financial activities outside the submitted work.

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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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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

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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)
Jan

2. Surname (Last Name)
Geurts

3. Date
02-November-2017

4. Are you the corresponding author? Yes No
Corresponding Author's Name
T.A.G. van Vugt

5. Manuscript Title
Antibiotic-releasing collagen fleeces in clinical treatment of chronic osteomyelitis: a systematic review

6. Manuscript Identifying Number (if you know it)
JBJS-D-17-01140

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

Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were **present during the 36 months prior to publication**.

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
Board member BonAlive Biomaterials	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Materials in kind for (pre)clinical studies and consultancy fee for advice on biomaterials paid to hospital not to person.

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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- Yes, the following relationships/conditions/circumstances are present (explain below):
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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. Geurts reports personal fees and non-financial support from Board member BonAlive Biomaterials, outside the submitted work; .

Evaluation and Feedback

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Other: Anything not covered under the previous three boxes

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

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Section 1. Identifying Information

1. Given Name (First Name)
Chris

2. Surname (Last Name)
Arts

3. Date
02-November-2017

4. Are you the corresponding author? Yes No
Corresponding Author's Name
T.A.G. van Vugt

5. Manuscript Title
Antibiotic-releasing collagen fleeces in clinical treatment of chronic osteomyelitis: a systematic review

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Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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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
Research support BonAlive Biomaterials	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Materials in kind for in vitro studies and consultancy fee on for advice on biomaterials paid to hospital not to person.
DSM biomedical	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	aterials in kind for in vitro studies and consultancy fee for advice and training on biomaterials paid to hospital not to person.
Hereaus	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consultancy fee for training on biomaterials paid to hospital not to person.

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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

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.

Patent?	Pending?	Issued?	Licensed?	Royalties?	Licensee?	Comments
antimicrobial coating chemistry	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Maastricht University, DSM Biomedical	Not related to this research

Section 5. Relationships not covered above

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Dr. Arts reports personal fees and non-financial support from Research support BonAlive Biomaterials, personal fees and non-financial support from DSM biomedical, personal fees from Hereaus, outside the submitted work; In addition, Dr. Arts has a patent antimicrobial coating chemistry issued to Maastricht University, DSM Biomedical .

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Section 1. Identifying Information

1. Given Name (First Name) Joep	2. Surname (Last Name) Walraven	3. Date 02-November-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name T.A.G. van Vugt
5. Manuscript Title Antibiotic-releasing collagen fleeces in clinical treatment of chronic osteomyelitis: a systematic review		
6. Manuscript Identifying Number (if you know it) JBJS-D-17-01140		

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Dr. Walraven has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Tom

2. Surname (Last Name)

van Vugt

3. Date

16-August-2017

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Antibiotic-releasing collagen fleeces in clinical treatment of chronic osteomyelitis: a systematic review

6. Manuscript Identifying Number (if you know it)

JBJS-D-17-01140

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