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.

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Kreder 1
## Identifying Information

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

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

3. **Date**
   - 15-July-2018

4. **Are you the corresponding author?**
   - Yes [✔]

**Corresponding Author’s Name**
- Bheeshma Ravi

5. **Manuscript Title**
   - Comparing Complications and Costs of Total Hip Arthroplasty versus Hemiarthroplasty for Femoral Neck Fractures: a propensity-score matched population-based study

6. **Manuscript Identifying Number (if you know it)**

## 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 [✔]

## Relevant financial activities outside the submitted work.

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

## Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
- Yes [ ]  
- No [✔]

---

Kreder
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Dr. Kreder has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
HAYAT

2. Surname (Last Name)  
KHAN

3. Date  
15-July-2018

4. Are you the corresponding author?  
☑ No

Corresponding Author’s Name  
DR BHEESHMA RAVI

5. Manuscript Title  
Comparing Complications and Costs of Total Hip Arthroplasty versus Hemiarthroplasty for Femoral Neck Fractures: a propensity-score matched population-based study

6. Manuscript Identifying Number (if you know it)

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Dr. KHAN has nothing to disclose.

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Bheeshma

2. Surname (Last Name)  
   Ravi

3. Date  
   15-July-2018

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

5. Manuscript Title  
   Comparing Complications and Costs of Total Hip Arthroplasty versus Hemiarthroplasty for Femoral Neck Fractures: a propensity-score matched population-based study

6. Manuscript Identifying Number (if you know it)

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**Section 2. The Work Under Consideration for Publication**

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   ❌ Yes  
   ✔ No

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**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

---

Ravi
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

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Dr. Ravi has nothing to disclose.

Evaluation and Feedback

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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)  Pincus
3. Date  15-July-2018
4. Are you the corresponding author?  No
5. Manuscript Title
Comparing Complications and Costs of Total Hip Arthroplasty versus Hemiarthroplasty for Femoral Neck Fractures: a propensity-score matched population-based study
6. Manuscript Identifying Number (if you know it)
JBJS-D-18-00539

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Are there any relevant conflicts of interest?  No

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Dr. Pincus has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
   David  

2. Surname (Last Name)  
   Wasserstein  

3. Date  
   16-July-2018

4. Are you the corresponding author?  
   Yes ✗ No  

   Corresponding Author’s Name  
   Bheeshma Ravi

5. Manuscript Title  
   Comparing Complications and Costs of Total Hip Arthroplasty versus Hemiarthroplasty for Femoral Neck Fractures: a propensity-score matched population-based study

6. Manuscript Identifying Number (if you know it)

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Dr. Wasserstein has nothing to disclose.

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

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Section 1. Identifying Information

1. Given Name (First Name)  
   Richard

2. Surname (Last Name)  
   Jenkinson

3. Date  
   04-August-2018

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

Corresponding Author’s Name  
Bheeshma Ravi

5. Manuscript Title  
   Comparing Complications and Costs of Total Hip Arthroplasty versus Hemiarthroplasty for Femoral Neck Fractures: a propensity-score matched population-based study,” JBJS-D-18-00539R1

6. Manuscript Identifying Number (if you know it)  
   JBJS-D-18-00539R1

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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.)?

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Dr. Jenkinson has nothing to disclose.

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