ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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<tr>
<td>1. Given Name (First Name)</td>
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<tr>
<td>Julie</td>
<td>Agel</td>
<td>08-February-2018</td>
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</tbody>
</table>

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

Corresponding Author’s Name  
Ann E. Van Heest, MD

5. Manuscript Title  
Resident Surgical Skills Web-Based Evaluation: A Comparison of Two Assessment Tools

6. Manuscript Identifying Number (if you know it)  
JBJS-D-17-01512-R1

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   - No

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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   - No
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Julie Agel has nothing to disclose.

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<td>02-February-2018</td>
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4. Are you the corresponding author? [ ] Yes [ ] No

Corresponding Author’s Name
Ann E. Van Heest, MD

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Dr. Ames has nothing to disclose.

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<td>Asghar</td>
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<td>3. Date</td>
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<td>4. Are you the corresponding author?</td>
<td>Yes</td>
</tr>
<tr>
<td>Corresponding Author’s Name</td>
<td>Ann E. Van Heest, MD</td>
</tr>
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Dr. Asghar has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
John

2. Surname (Last Name)  
Harrast

3. Date  
08-February-2018

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

Corresponding Author’s Name  
Ann E. Van Heest, MD

5. Manuscript Title  
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1. Given Name (First Name)  JL
2. Surname (Last Name)  Marsh
3. Date  08-February-2018
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Are there any relevant conflicts of interest?  ☑ Yes  ☐ No

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If yes, please fill out the appropriate information below.

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<td>Royalties</td>
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</tbody>
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ICMJE Form for Disclosure of Potential Conflicts of Interest

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 6. Disclosure Statement

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Dr. Marsh reports grants from DOD, grants from OTA, grants from OMeGA, grants from NBME, grants from ABOS, grants from AHRQ, other from BioMet, other from Oxford Press, 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) Joshua
2. Surname (Last Name) Patt
3. Date 08-February-2018
4. Are you the corresponding author? ☐ Yes ☑ No
   Corresponding Author’s Name Ann E. Van Heest, MD
5. Manuscript Title
   Resident Surgical Skills Web-Based Evaluation: A Comparison of Two Assessment Tools
6. Manuscript Identifying Number (if you know it)
   JBJS-D-17-01512-R1

Section 2. The Work Under Consideration for Publication

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Dr. Patt has nothing to disclose.

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# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Section 1. Identifying Information

<table>
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<td>09-February-2018</td>
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4. Are you the corresponding author? [ ] Yes ✑ No

<table>
<thead>
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<th>Corresponding Author’s Name</th>
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<tbody>
<tr>
<td>Ann E. Van Heest, MD</td>
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</table>

5. Manuscript Title

Resident Surgical Skills Web-Based Evaluation: A Comparison of Two Assessment Tools

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JBJS-D-17-01512-R1

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Dr. Peabody has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  Robert
2. Surname (Last Name)  Sterling
3. Date  08-February-2018
4. Are you the corresponding author?  Yes  No  ✔
5. Manuscript Title
   Resident Surgical Skills Web-Based Evaluation: A Comparison of Two Assessment Tools
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   Ann

2. Surname (Last Name)  
   Van Heest

3. Date  
   23-January-2018

4. Are you the corresponding author?  
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