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.

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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)  
   Notker

2. Surname (Last Name)  
   Blankenburg

3. Date  
   19-July-2018

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

   Corresponding Author’s Name  
   Philipp Pieroh

5. Manuscript Title  
   Fragility Fractures of the Pelvis Classification: A Multicenter Assessment of the Intra- and Interrater Reliabilities and Percentage of Agreement

6. Manuscript Identifying Number (if you know it)  
   JBJS-D-18-00930

## 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  
   [x] No

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Are there any relevant conflicts of interest?  
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   [x] No

## Section 4. Intellectual Property -- Patents & Copyrights

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

Mr. Blankenburg has nothing to disclose.

Evaluation and Feedback

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Dallacker-Losensky
ICMJE Form for Disclosure of Potential Conflicts of Interest

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<tr>
<th>1. Given Name (First Name)</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Kevin</td>
<td>Dallacker-Losensky</td>
<td>29-July-2018</td>
</tr>
</tbody>
</table>

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

5. Manuscript Title  
   Fragility Fractures of the Pelvis Classification: A Multicenter Assessment of the Intra- and Interrater Reliabilities and Percentage of Agreement

6. Manuscript Identifying Number (if you know it)  
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   - Yes
   - No  
   ✔ No

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

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
   - Yes
   - No  
   ✔ No
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Dr. Dallacker-Losensky has nothing to disclose.

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Gras
## Section 1. Identifying Information

1. Given Name (First Name)  
   Florian

2. Surname (Last Name)  
   Gras

3. Date  
   30-July-2018

4. Are you the corresponding author?  
   ☑ No

Corresponding Author’s Name

Philipp Pieroh

5. Manuscript Title  
   Fragility Fractures of the Pelvis Classification: A Multicenter Assessment of the Intra- and Interrater Reliabilities and Percentage of Agreement

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Dr. Gras has nothing to disclose.

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## Section 1. Identifying Information

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

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

3. **Date**
   - 29-July-2018

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

5. **Manuscript Title**
   - Fragility Fractures of the Pelvis Classification: A Multicenter Assessment of the Intra- and Interrater Reliabilities and Percentage of Agreement

6. **Manuscript Identifying Number (if you know it)**
   - JBJS-D-18-00930

**Corresponding Author’s Name**
- Philipp Pieroh

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Dr. Herath has nothing to disclose.

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<tr>
<td>Tim</td>
<td>Hohmann</td>
<td>30-July-2018</td>
</tr>
</tbody>
</table>

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

Corresponding Author’s Name  
Philipp Pieroh

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**ICMJE Form for Disclosure of Potential Conflicts of Interest**

### Section 1. Identifying Information

1. **Given Name (First Name)**  
   Christoph  

2. **Surname (Last Name)**  
   Dr. Ihle  

3. **Date**  
   28-July-2018  

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

   **Corresponding Author’s Name**  
   Philipp Pieroh

5. **Manuscript Title**  
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Are there any relevant conflicts of interest?  
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## Section 1. Identifying Information

1. **Given Name (First Name)**  
   Christoph

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

3. **Date**  
   19-July-2018

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

   **Corresponding Author’s Name**  
   Philipp Pieroh

5. **Manuscript Title**  
   Fragility Fractures of the Pelvis Classification: A Multicenter Assessment of the Intra- and Interrater Reliabilities and Percentage of Agreement

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<tr>
<td>Hans-Georg</td>
<td>Palm</td>
<td>03-August-2018</td>
</tr>
</tbody>
</table>

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

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# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Section 1. Identifying Information

1. Given Name (First Name)  
   Alexander

2. Surname (Last Name)  
   Pflug

3. Date  
   30-July-2018

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

   Corresponding Author’s Name  
   Philipp Pieroh

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<tr>
<td>Philipp</td>
<td>Pieroh</td>
<td>19-July-2018</td>
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1. Given Name (First Name)  Andreas
2. Surname (Last Name)  Höch
3. Date  19-July-2018
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ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 1. Identifying Information**

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5. Corresponding Author's Name

Philipp Pieroh

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Are there any relevant conflicts of interest? Yes ☐ No ☑

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Dr. Schröder 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)  
Sven
2. Surname (Last Name)  
Märdian
3. Date  
29-July-2018
4. Are you the corresponding author?  
☐ Yes  ✔ No

Corresponding Author’s Name
Philipp Pieroh

5. Manuscript Title
Fragility Fractures of the Pelvis Classification: A Multicenter Assessment of the Intra- and Interrater Reliabilities and Percentage of Agreement

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Dr. Märdian has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name) Fabian M.
2. Surname (Last Name) Stuby
3. Date 27-July-2018

4. Are you the corresponding author? ☒ No

Corresponding Author’s Name Philipp Pieroh

5. Manuscript Title
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Dr. Stuby has nothing to disclose.

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1. Given Name (First Name)  
   Daniel

2. Surname (Last Name)  
   Wagner

3. Date  
   29-July-2018

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

   Corresponding Author’s Name  
   Philipp Pieroh

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Dr. Wagner has nothing to disclose.

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<td>Witenberg</td>
<td>28-July-2018</td>
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   - Yes  
   - No  
   - [ ] Yes  
   - [x] No

Corresponding Author’s Name  
Philipp Pieroh

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