ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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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) Michael
2. Surname (Last Name) Brage
3. Date 22-July-2018
4. Are you the corresponding author? ☑ No
5. Manuscript Title
   Mid-term Follow-up of Bipolar Fresh Osteochondral Allograft Transplantation of the Tibiotalar Joint
6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Section 4. Intellectual Property -- Patents &Copyrights

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Section 6. Disclosure Statement

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Dr. Brage 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)  
William

2. Surname (Last Name)  
Bugbee

3. Date  
28-August-2018

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

5. Manuscript Title  
Mid-term Follow-up of Bipolar Fresh Osteochondral Allograft Transplantation of the Tibiotalar Joint

6. Manuscript Identifying Number (if you know it)

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.)?  

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☑ 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.

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<tbody>
<tr>
<td>JRF Ortho</td>
<td></td>
<td>☑</td>
<td></td>
<td></td>
<td>Consulting</td>
</tr>
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Dr. Bugbee reports personal fees from JRF Ortho, outside the submitted work.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Michael

2. Surname (Last Name)  
   French

3. Date  
   19-July-2018

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

Corresponding Author’s Name
   William D. Bugbee, MD

5. Manuscript Title  
   Mid-term Follow-up of Bipolar Fresh Osteochondral Allograft Transplantation of the Tibiotalar Joint

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Dr. French has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Julie

2. Surname (Last Name)  
   McCauley

3. Date  
   19-July-2018

4. Are you the corresponding author?  
   No

5. Manuscript Title  
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Mrs. McCauley reports other from JRF Ortho, outside the submitted work.

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Section 1. Identifying Information

1. Given Name (First Name) Pamela
2. Surname (Last Name) Pulido
3. Date 03-August-2018
4. Are you the corresponding author? ☑ No
   Corresponding Author’s Name William D. Bugbee, MD
5. Manuscript Title Mid-term Follow-up of Bipolar Fresh Osteochondral Allograft Transplantation of the Tibiotalar Joint
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Ms. Pulido has nothing to disclose.

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