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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Royalties: Funds are coming in to you or your institution due to your patent
## Section 1. Identifying Information

1. Given Name (First Name)  
amain charles

2. Surname (Last Name)  
masquelet

3. Date  
20-October-2018

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

Corresponding Author's Name  
peter giannoudis

5. Manuscript Title  
Bone Repair Using the Masquelet Technique: Current Concepts Review

6. Manuscript Identifying Number (if you know it)  
JBJS-D-18-00842R1

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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?  
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Dr. masquelet has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
laurent

2. Surname (Last Name)  
obert

3. Date  
20-October-2018

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

Corresponding Author’s Name  
peter giannoudis

5. Manuscript Title  
Bone Repair Using the Masquelet Technique: Current Concepts Review

6. Manuscript Identifying Number (if you know it)  
JBJS-D-18-00842R1

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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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Dr. obert reports personal fees from FX SOLUTION, personal fees from ZIMMER, personal fees from EVOLUTIS, personal fees from WRIGHT, personal fees from MEDARTIS, outside the submitted work; but certifies that he has no commercial associations that might pose a conflict of interest in connection with the submitted article

Evaluation and Feedback

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1. Given Name (First Name)  
   Peter

2. Surname (Last Name)  
   Giannoudis

3. Date  
   07-September-2018

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

5. Manuscript Title  
   Bone Repair Using the Masquelet Technique: Current Concepts Review.

6. Manuscript Identifying Number (if you know it)  
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Dr. Giannoudis has nothing to disclose related to the submitted work in the journal.

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Section 1. Identifying Information

1. Given Name (First Name)  Nikolaos
2. Surname (Last Name)  Kanakaris
3. Date  17-October-2018
4. Are you the corresponding author?  ✔ No
5. Manuscript Title
Bone Repair Using the Masquelet Technique: Current Concepts Review
6. Manuscript Identifying Number (if you know it)
JBJS-S-14-01414

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# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Section 1.  Identifying Information

1. Given Name (First Name)  
   Paul

2. Surname (Last Name)  
   Stafford

3. Date  
   17-October-2018

4. Are you the corresponding author?  
   ✔ Yes  
   No

5. Manuscript Title  
   Bone Repair Using the Masquelet Technique: Current Concepts Review

6. Manuscript Identifying Number (if you know it)  
   JBJS-D-18-00842R

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Are there any relevant conflicts of interest?  
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