

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Gregory	2. Surname (Last Name) Maletis	3. Date 22-April-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Ronald A. Navarro
5. Manuscript Title The Association Between Race/Ethnicity and Revision Following Anterior Cruciate Ligament Reconstruction in a Universally Insured Cohort		
6. Manuscript Identifying Number (if you know it) JBJS-D-18-01408		

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Dr. Maletis has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Maria	2. Surname (Last Name) Inacio	3. Date 22-April-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Ronald A. Navarro
5. Manuscript Title The Association Between Race/Ethnicity and Revision Following Anterior Cruciate Ligament Reconstruction in a Universally Insured Cohort		
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Dr. Inacio has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Ronald

2. Surname (Last Name)

Wyatt

3. Date

22-April-2019

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

Ronald A. Navarro

5. Manuscript Title

The Association Between Race/Ethnicity and Revision Following Anterior Cruciate Ligament Reconstruction in a Universally Insured Cohort

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JBJS-D-18-01408

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Heather

2. Surname (Last Name)
Prentice

3. Date
22-April-2019

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Ronald A. Navarro

5. Manuscript Title
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Navarro

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