ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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1. Identifying information.
2. The work under consideration for publication.
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
Robert

2. Surname (Last Name)  
Barrack

3. Date  
16-January-2019

4. Are you the corresponding author?  
✔ Yes  
No

5. Manuscript Title  
The impact of surgeon volume and training status on implant alignment in total knee arthroplasty

6. Manuscript Identifying Number (if you know it)

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✔ Yes  
No

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No
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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?  

- [ ] Yes  
- [✔] No

**Section 5. Relationships not covered above**

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Dr. Barrack reports royalties and consulting fees from Stryker, grants from Zimmer-Biomet, grants from EOS Imaging, grants from Smith & Nephew, grants from Wright Medical Technology, other from The McGraw-Hill Companies, Inc, other from Wolters Kluwer Health - Lippincott Williams & Wilkins, outside the submitted work.

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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)  
Charles

2. Surname (Last Name)  
Lawrie

3. Date  
20-January-2019

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

Corresponding Author’s Name  
Robert Barrack

5. Manuscript Title  
The impact of surgeon volume and training status on implant alignment in total knee arthroplasty

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☑ Yes  ☐ No

If yes, please fill out the appropriate information below.

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**Section 6. Disclosure Statement**

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Dr. Lawrie reports personal fees from Medtronic, personal fees from KCI, outside the submitted work.

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### Section 1. Identifying Information

1. Given Name (First Name)  
   Gregory  
2. Surname (Last Name)  
   Kazarian  
3. Date  
   18-January-2019  
4. Are you the corresponding author?  
   Yes [ ]  No [x]  
   Corresponding Author’s Name  
   Robert Barrack  
5. Manuscript Title  
   The impact of surgeon volume and training status on implant alignment in total knee arthroplasty  
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Greg Kazarian has nothing to disclose.

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Miller
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
Gary

2. Surname (Last Name)  
Miller

3. Date  
16-January-2019

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

Corresponding Author’s Name  
Robert Barrack

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

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**Section 1. Identifying Information**

1. Given Name (First Name)  
Fares  

2. Surname (Last Name)  
Haddad  

3. Date  
16-January-2019  

4. Are you the corresponding author?  
Yes  ✔  No  

5. Manuscript Title  
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Are there any relevant conflicts of interest?  
Yes  ✔  No

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Are there any relevant conflicts of interest?  
Yes  ✔  No

If yes, please fill out the appropriate information below.

<table>
<thead>
<tr>
<th>Name of Entity</th>
<th>Grant?</th>
<th>Personal Fees?</th>
<th>Non-Financial Support?</th>
<th>Other?</th>
<th>Comments</th>
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<td>Corin</td>
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</table>
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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?  

- [ ] Yes  
- [x] No

**Section 5. Relationships not covered above**

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

- [x] Yes, the following relationships/conditions/circumstances are present (explain below):
- [ ] No other relationships/conditions/circumstances that present a potential conflict of interest

I sit on a number of boards including the Institute of Sport, Exercise and Health, the British Ortho Sports Trauma and Arthroscopy Association, the Specialist Society to the British Ortho Association, and the Bone and Joint Journal.

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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.

Dr. Haddad reports grants and personal fees from Stryker, grants and personal fees from Smith & Nephew, grants and personal fees from MatOrtho, grants and personal fees from Corin, outside the submitted work; and I sit on a number of boards including the Institute of Sport, Exercise and Health, the British Ortho Sports Trauma and Arthroscopy Association, the Specialist Society to the British Ortho Association, and the Bone and Joint Journal.

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1. Identifying information.
2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking “No” means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check “Yes”.

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This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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**Section 1. Identifying Information**

<table>
<thead>
<tr>
<th>1. Given Name (First Name)</th>
<th>Matthew</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Surname (Last Name)</td>
<td>Donaldson</td>
</tr>
<tr>
<td>3. Date</td>
<td>17-January-2019</td>
</tr>
<tr>
<td>4. Are you the corresponding author?</td>
<td>Yes ✔ No</td>
</tr>
<tr>
<td>Corresponding Author’s Name</td>
<td>Robert Barrack</td>
</tr>
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<td>The impact of surgeon volume and training status on implant alignment in total knee arthroplasty</td>
</tr>
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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 ✔ No

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Dr. Donaldson has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Toby
2. Surname (Last Name) Barrack
3. Date 16-January-2019

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

Corresponding Author's Name
Robert Barrack

5. Manuscript Title
The impact of surgeon volume and training status on implant alignment in total knee arthroplasty

6. Manuscript Identifying Number (if you know it)

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