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)  
   stephen

2. Surname (Last Name)  
   burnett

3. Date  
   24-March-2015

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

5. Manuscript Title  
   Pyoderma Gangrenosum in Revision Total Hip Arthroplasty Clinical and Histopathological Findings with a Seven-Year Follow-Up: A Case Report

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Dr. burnett has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
   james

2. Surname (Last Name)
   mathers

3. Date
   24-March-2015

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

   Corresponding Author’s Name
   stephen burnett

5. Manuscript Title
   Pyoderma Gangrenosum in Revision Total Hip Arthroplasty Clinical and Histopathological Findings with a Seven-Year Follow-Up: A Case Report

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Dr. mathers has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) rajesh
2. Surname (Last Name) nair
3. Date 24-March-2015

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

Corresponding Author’s Name Stephen Burnett

5. Manuscript Title Pyoderma Gangrenosum in Revision Total Hip Arthroplasty Clinical and Histopathological Findings with a Seven-Year Follow-Up: A Case Report
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Dr. nair has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
douglas

2. Surname (Last Name)  
sawyer

3. Date  
24-March-2015

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

Corresponding Author’s Name  
estephen burnett

5. Manuscript Title  
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1. Given Name (First Name)  
   ariella

2. Surname (Last Name)  
   zbar

3. Date  
   24-March-2015

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

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   stephen burnett

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Dr. zbar has nothing to disclose.

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