

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

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Section 1. Identifying Information

1. Given Name (First Name)
Mario

2. Surname (Last Name)
John

3. Date
31-January-2014

4. Are you the corresponding author? Yes No

5. Manuscript Title
Stress fracture of the femoral neck through previously inserted metallic hardware: A Case Report

6. Manuscript Identifying Number (if you know it)

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Dr. Mario John has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Victor

2. Surname (Last Name)
Anyangwe

3. Date
12-March-2014

4. Are you the corresponding author? Yes No

5. Manuscript Title
Stress Fracture of the Femoral Neck Through Previously Inserted Metallic Hardware: A Case Report

6. Manuscript Identifying Number (if you know it)

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1. Given Name (First Name)

Bahman

2. Surname (Last Name)

Sadr

3. Date

31-January-2014

4. Are you the corresponding author?

Yes No

5. Manuscript Title

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1. Given Name (First Name)
Jabari

2. Surname (Last Name)
Martin

3. Date
01-February-2014

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