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)  
   Christopher

2. Surname (Last Name)  
   Mileto

3. Date  
   07-March-2014

4. Are you the corresponding author?  
   ✔ Yes  
   No

5. Manuscript Title  
   Proximal tibia epiphyseal fracture following caesarean section: a case report

6. Manuscript Identifying Number (if you know it)

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Dr. Mileto has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  James
2. Surname (Last Name)  Tucci
3. Date  07-March-2014
4. Are you the corresponding author?  Yes  No

Corresponding Author’s Name  Christopher Mileto

5. Manuscript Title  Proximal tibia epiphyseal fracture following caesarean section: a case report

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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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

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Dr. Tucci has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Ramin

2. Surname (Last Name)  
   Sadeghpour

3. Date  
   07-March-2014

4. Are you the corresponding author?  
   Yes ✔ No

   Corresponding Author’s Name  
   Christopher Mileto

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Dr. Sadeghpour has nothing to disclose.

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<tr>
<td>Maya</td>
<td>Culbertson</td>
<td>07-March-2014</td>
</tr>
</tbody>
</table>

4. Are you the corresponding author?  
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   - No ✔

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Dr. Culbertson has nothing to disclose.

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<tr>
<td>Jenifer</td>
<td>Hashem</td>
<td>07-March-2014</td>
</tr>
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4. Are you the corresponding author?  
   - Yes  
   - No
   
5. Manuscript Title
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Dr. Hashem has nothing to disclose.

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