ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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### Section 1. Identifying Information

1. Given Name (First Name)  
   Aakash

2. Surname (Last Name) 
   Chauhan

3. Date  
   22-February-2016

4. Are you the corresponding author?  
   ✔ Yes  
   No

5. Manuscript Title  
   Using Double Contrast CT Scan Arthrography to Diagnose an Occult Dissociation of a Cemented Polyethylene Liner

6. Manuscript Identifying Number (if you know it)

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Dr. Chauhan 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) Sean
2. Surname (Last Name) Fitzpatrick
3. Date 22-February-2016
4. Are you the corresponding author? ☑ Yes ☐ No
5. Manuscript Title
Using Double Contrast CT Scan Arthrography to Diagnose an Occult Dissociation of a Cemented Polyethylene Liner
6. Manuscript Identifying Number (if you know it) 

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Dr. Fitzpatrick has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  Robert
2. Surname (Last Name)  Sciulli
3. Date  22-February-2016
4. Are you the corresponding author?  ☑ No
   Corresponding Author’s Name  Aakash Chauhan
5. Manuscript Title
   Using Double Contrast CT Scan Arthrography to Diagnose an Occult Dissociation of a Cemented Polyethylene Liner
6. Manuscript Identifying Number (if you know it)

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Dr. Sciulli has nothing to disclose.

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Jeffrey

2. Surname (Last Name)  
   Sewecke

3. Date  
   22-February-2016

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

   Corresponding Author’s Name  
   Aakash Chauhan

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

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<tr>
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<th>Nicholas</th>
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<tbody>
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<td>2. Surname (Last Name)</td>
<td>Sotereanos</td>
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<tr>
<td>3. Date</td>
<td>22-February-2016</td>
</tr>
<tr>
<td>4. Are you the corresponding author?</td>
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</tr>
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</table>

**Corresponding Author’s Name**

Aakash Chauhan

**Manuscript Title**

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Dr. Sotereanos has nothing to disclose.

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