ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Royalties: Funds are coming in to you or your institution due to your patent
# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Section 1. Identifying Information

1. **Given Name (First Name)**  
   Blake

2. **Surname (Last Name)**  
   Bodendorfer

3. **Date**  
   07-November-2017

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

   **Corresponding Author’s Name**  
   Joshua Kotler

5. **Manuscript Title**  
   Tibial plateau fracture following bone-patellar tendon-bone allograft anterior cruciate ligament reconstruction

6. **Manuscript Identifying Number (if you know it)**  
   Pending

## Section 2. The Work Under Consideration for Publication

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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Are there any relevant conflicts of interest?  
[ ] Yes  
✔ No

## Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
[ ] Yes  
✔ No
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Section 6. Disclosure Statement

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Dr. Bodendorfer has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Caitlin
2. Surname (Last Name)  Thornley
3. Date  07-November-2017
4. Are you the corresponding author?  Yes  No

Corresponding Author’s Name
Joshua Kotler

5. Manuscript Title
Tibial plateau fracture following bone-patellar tendon-bone allograft anterior cruciate ligament reconstruction

6. Manuscript Identifying Number (if you know it)
Pending

Section 2. The Work Under Consideration for Publication

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. Thornley has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name)  
   Joshua

2. Surname (Last Name)  
   Kotler

3. Date  
   07-November-2017

4. Are you the corresponding author?  
   Yes ✔ No

5. Manuscript Title  
   Tibial plateau fracture following bone-patellar tendon-bone allograft anterior cruciate ligament reconstruction

6. Manuscript Identifying Number (if you know it)  
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   William

2. Surname (Last Name)  
   Postma

3. Date  
   07-November-2017

4. Are you the corresponding author?  
   Yes    ✔ No

   Corresponding Author’s Name  
   Joshua Kotler

5. Manuscript Title  
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