ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

1. Identifying information.

2. The work under consideration for publication.

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This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  David
2. Surname (Last Name)  Ge
3. Date  21-December-2017
4. Are you the corresponding author?  Yes  No
   Corresponding Author’s Name
   Ran Schwarzkopf
5. Manuscript Title
   Case Report: Total Hip Arthroplasty In A Patient With Camurati-Engelmann Disease
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

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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Mr. Ge 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)  Jacob
2. Surname (Last Name) Ziegler
3. Date 22-August-2017
4. Are you the corresponding author? [ ] Yes [✓] No

Corresponding Author’s Name
Ran Schwarzkopf

5. Manuscript Title
Case Report: Total Hip Arthroplasty In A Patient With Camurati-Engelmann Disease

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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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Ziegler has nothing to disclose.

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Schwarzkopf
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Ran
2. Surname (Last Name) Schwarzkopf
3. Date 21-August-2017
4. Are you the corresponding author? ✔ Yes  No

5. Manuscript Title
Case Report: Total Hip Arthroplasty In A Patient With Camurati-Engelmann Disease

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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If yes, please fill out the appropriate information below.

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<th>Non-Financial Support?</th>
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Dr. Schwarzkopf reports grants and personal fees from Smith&Nephew, personal fees from Intelijoint, outside the submitted work.

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### Section 1. Identifying Information

1. **Given Name (First Name)**
   - Stephen

2. **Surname (Last Name)**
   - Yu

3. **Date**
   - 24-August-2017

4. **Are you the corresponding author?**
   - ☑ No

   **Corresponding Author’s Name**
   - Ran Schwarzkopf

5. **Manuscript Title**
   - Case Report: Total Hip Arthroplasty In A Patient With Camurati-Engelmann Disease

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

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Dr. Yu has nothing to disclose.

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