ICMJE Form for Disclosure of Potential Conflicts of Interest

**Instructions**

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4. **Intellectual Property.**

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

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- **Royalties:** Funds are coming in to you or your institution due to your patent
## Section 1. Identifying Information

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

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

3. **Date**
   - 05-July-2018

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

   **Corresponding Author’s Name**
   - Jordan Fakhoury

5. **Manuscript Title**
   - Total Knee Arthroplasty in Familial Absence of Patella Syndrome - A case-report and 40 year update

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

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## 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

---

## Section 3. Relevant financial activities outside the submitted work.

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## 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. Alpert has nothing to disclose.

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**Evaluation and Feedback**

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Royalties: Funds are coming in to you or your institution due to your patent
## Section 1. Identifying Information

1. **Given Name (First Name)**
   Farhan
2. **Surname (Last Name)**
   Karim
3. **Date**
   30-June-2018
4. **Are you the corresponding author?**
   ✔ No
5. **Manuscript Title**
   Total Knee Arthroplasty in Familial Absence of Patella Syndrome - A case-report and 40 year update
6. **Manuscript Identifying Number (if you know it)**

## 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?  
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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Karim has nothing to disclose.

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<table>
<thead>
<tr>
<th>1. Given Name (First Name)</th>
<th>2. Surname (Last Name)</th>
<th>3. Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adam</td>
<td>Bitterman</td>
<td>11-April-2018</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Corresponding Author’s Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jordan Fakhoury</td>
</tr>
</tbody>
</table>

5. Manuscript Title

Total Knee Arthroplasty in Familial Absence of Patella Syndrome - A case-report and 40 year update

6. Manuscript Identifying Number (if you know it)

CC-D-17-00329

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Dr. Bitterman has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  Mikhail
2. Surname (Last Name)  Khaimov
3. Date  11-April-2018
4. Are you the corresponding author?  ☑ No
5. Manuscript Title
   Total Knee Arthroplasty in Familial Absence of Patella Syndrome - A case-report and 40 year update
6. Manuscript Identifying Number (if you know it)
   CC-D-17-00329

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Are there any relevant conflicts of interest?  ☑ No

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Dr. Khaimov has nothing to disclose.

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Jordan

2. Surname (Last Name)  
   Fakhoury

3. Date  
   01-April-2018

4. Are you the corresponding author?  
   ✔ Yes  
   ☐ No

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

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