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.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Elisa
2. Surname (Last Name)  Emanuelli
3. Date
   04-July-2018
4. Are you the corresponding author?  ☑ No
5. Manuscript Title
   Gout presenting as acute hip pain in a young female: A case report
6. Manuscript Identifying Number (if you know it)
   CC-D-18-00164

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Are there any relevant conflicts of interest?  ☑ No

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Elisa Emanuelli has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  Scott
2. Surname (Last Name)  Mullen
3. Date  04-July-2018
4. Are you the corresponding author?  Yes ☒ No
Corresponding Author’s Name  Shin Xu

5. Manuscript Title  Gout presenting as acute hip pain in a young female: A case report

6. Manuscript Identifying Number (if you know it)  CC-D-18-00164

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Dr. Mullen has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) John  
2. Surname (Last Name) Schroepel  
3. Date 04-July-2018  

4. Are you the corresponding author? ☐ Yes ☑ No  
   Corresponding Author’s Name Shin Xu

5. Manuscript Title  
   Gout presenting as acute hip pain in a young female: A case report

6. Manuscript Identifying Number (if you know it)  
   CC-D-18-00164

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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

Schroepel
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Dr. Schroeppel has nothing to disclose.

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## Section 1. Identifying Information

| 1. Given Name (First Name) | Armin |
| 2. Surname (Last Name)    | Tarakemeh |
| 3. Date                   | 04-July-2018 |
| 4. Are you the corresponding author? | Yes ☐ No ☑ |
| Corresponding Author’s Name | Shin Xu |

| 5. Manuscript Title |
| Gout presenting as acute hip pain in a young female: A case report |

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| CC-D-18-00164 |

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Armin Tarakemeh has nothing to disclose.

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## Section 1. Identifying Information

| 1. Given Name (First Name) | Bryan |
| 2. Surname (Last Name) | Vopat |
| 3. Date | 04-July-2018 |

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

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   Shin Xu

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
Shin

2. Surname (Last Name)  
Xu

3. Date  
04-July-2018

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

5. Manuscript Title  
Gout presenting as acute hip pain in a young female: A case report

6. Manuscript Identifying Number (if you know it)  
CC-D-18-00164

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.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to publication.

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 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

☐ Yes, the following relationships/conditions/circumstances are present (explain below):

☑ No other relationships/conditions/circumstances that present a potential conflict of interest

At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

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. Xu has nothing to disclose.

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.