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ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 1. Identifying Information**

1. Given Name (First Name)  
Scott

2. Surname (Last Name)  
Westberg

3. Date  
06-August-2018

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

5. Manuscript Title  
Small bowel obstruction secondary to entrapment in a minimally displaced acetabular fracture

6. Manuscript Identifying Number (if you know it)  
CC-D-18-00222

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Are there any relevant conflicts of interest?  
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Christopher
2. Surname (Last Name)  Fung
3. Date  22-August-2018
4. Are you the corresponding author?  Yes  No
   Corresponding Author’s Name  Scott Westberg
5. Manuscript Title
   Small bowel obstruction secondary to entrapment in a minimally displaced acetabular fracture
6. Manuscript Identifying Number (if you know it)
   CC-D-18-00222

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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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Nathalie

2. Surname (Last Name)  
   Kupfer

3. Date  
   23-August-2018

4. Are you the corresponding author?  
   Yes ✔ No

   Corresponding Author's Name  
   Scott Westberg

5. Manuscript Title  
   Small bowel obstruction secondary to entrapment in a minimally displaced acetabular fracture

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Dr. Kupfer has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  Sandy
2. Surname (Last Name)  Widder
3. Date  22-August-2018
4. Are you the corresponding author?  Yes  No
5. Manuscript Title
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<table>
<thead>
<tr>
<th>1. Given Name (First Name)</th>
<th>2. Surname (Last Name)</th>
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<tr>
<td>Donald</td>
<td>Glasgow</td>
<td>23-August-2018</td>
</tr>
</tbody>
</table>

4. Are you the corresponding author?  
   - Yes  
   - No  
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Dr. Glasgow has nothing to disclose.

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