

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name)

TISO

2. Surname (Last Name)

GIOVANNI

3. Date

30-August-2018

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

MIKEL ARAMBERRI

5. Manuscript Title

A Modified Arthroscopic Technique of Gracilis Tendon Graft with Double Fixation System for Treatment of Type V Acromioclavicular Injuries

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Dr. GIOVANNI has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
MIKEL

2. Surname (Last Name)
ARAMBERRI

3. Date
21-August-2018

4. Are you the corresponding author? Yes No

5. Manuscript Title

A modified arthroscopic technique of gracilis tendon graft with double fixation system for treatment of type V acromioclavicular injuries.

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FERNANDO

2. Surname (Last Name)
SINES

3. Date
21-August-2018

4. Are you the corresponding author? Yes No

Corresponding Author's Name
MIKEL ARAMBERRI

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IÑAKI

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MIKEL ARAMBERRI

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