ICMJE Form for Disclosure of Potential Conflicts of Interest

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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3. Relevant financial activities outside the submitted work.

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

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Section 1. Identifying Information

1. Given Name (First Name)  
   Michael  

2. Surname (Last Name)  
   Goldring  

3. Date  
   29-December-2018  

4. Are you the corresponding author?  
   ☑ No  
   Corresponding Author’s Name  
   Luke Granger  

5. Manuscript Title  
   The Paediatric Hip: A Rare Case of Acetabular Labral Tear and Paralabral Cyst  

6. Manuscript Identifying Number (if you know it)  
   CC-D-18-00405

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?  
   ☑ No

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

Mr. Goldring has nothing to disclose.

Evaluation and Feedback

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1. Given Name (First Name)  
Satish

2. Surname (Last Name)  
Kutty

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29-December-2018

4. Are you the corresponding author?  
Yes ☑ No

Corresponding Author's Name  
Luke Granger

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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>Luke</td>
<td>Granger</td>
<td>12-March-2018</td>
</tr>
</tbody>
</table>

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

5. Manuscript Title
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