ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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   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
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Michael
2. Surname (Last Name)  DeRogatis
3. Date  05-October-2018
4. Are you the corresponding author?  Yes ✓ No
   Corresponding Author’s Name  Paul Issack MD, PhD
5. Manuscript Title  Acetabular Fracture Resulting From a Basketball Cutting Movement in a Young Adult Male: A Case Report
6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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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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Dr. DeRogatis has nothing to disclose.

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Issack
ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 1. Identifying Information**

1. Given Name (First Name)  
   Paul

2. Surname (Last Name)  
   Issack

3. Date  
   05-October-2018

4. Are you the corresponding author?  
   ✔ Yes  
   No

5. Manuscript Title  
   Acetabular Fracture Resulting From a Basketball Cutting Movement in a Young Adult Male: A Case Report

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?  
   Yes  
   ✔ No

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

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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
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?

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Dr. Issack has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Arthur
2. Surname (Last Name) Only
3. Date 05-October-2018
4. Are you the corresponding author? ☑ No
    Corresponding Author’s Name Paul Issack MD, PhD
5. Manuscript Title
    Acetabular Fracture Resulting From a Basketball Cutting Movement in a Young Adult Male: A Case Report
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Dr. Only has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Thomas
2. Surname (Last Name)  Sperring
3. Date  05-October-2018
4. Are you the corresponding author?  Yes  No
5. Manuscript Title  Acetabular Fracture Resulting From a Basketball Cutting Movement in a Young Adult Male: A Case Report
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Dr. Sperring has nothing to disclose.

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### ICMJE Form for Disclosure of Potential Conflicts of Interest

#### Section 1. Identifying Information

1. Given Name (First Name)  
   Elke

2. Surname (Last Name)  
   Wintermeyer

3. Date  
   05-October-2018

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

   Corresponding Author’s Name  
   Paul Issack MD, PhD

5. Manuscript Title  
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Are there any relevant conflicts of interest?  
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Dr. Wintermeyer has nothing to disclose.

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