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.

1. Identifying information.

2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

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

5. Relationships not covered above.

Use this section to report 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.

Definitions.

**Entity:** government agency, foundation, commercial sponsor, academic institution, etc.

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**Other:** Anything not covered under the previous three boxes

**Pending:** The patent has been filed but not issued

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**Licensed:** The patent has been licensed to an entity, whether earning royalties or not

**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)  
   Matthew

2. Surname (Last Name)  
   Houdek

3. Date  
   30-November-2016

4. Are you the corresponding author?  
   ☑ No  
   Corresponding Author’s Name  
   Joaquin Sanchez-Sotelo

5. Manuscript Title  
   Allograft-Prosthetic Composite Reconstruction for Massive Proximal Humerus Bone Loss in Reverse Shoulder Arthroplasty

6. Manuscript Identifying Number (if you know it)

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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. Houdek has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)  
Eric

2. Surname (Last Name)  
Wagner

3. Date  
30-November-2016

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

Corresponding Author’s Name  
Joaquin Sanchez-Sotelo, MD, PhD

5. Manuscript Title  
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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Wagner has nothing to disclose.

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Sanchez-Sotelo
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Joaquin
2. Surname (Last Name)  Sanchez-Sotelo
3. Date  30-November-2016
4. Are you the corresponding author?  ✔ Yes  No
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<td></td>
<td></td>
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Dr. Sanchez-Sotelo reports other from Stryker, outside the submitted work;

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