ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Francesc
2. Surname (Last Name)  Malagelada
3. Date  16-July-2018

4. Are you the corresponding author?  Yes  No

Corresponding Author’s Name  Jordi Vega

5. Manuscript Title  ARTHROSCOPIC ALL-INSIDE ANTERIOR TALOFIBULAR LIGAMENT REPAIR THROUGH A THREE-PORTAL AND NO ANKLE DISTRACTION TECHNIQUE.

6. Manuscript Identifying Number (if you know it)  JBJS.ST.18.00026

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Dr. Malagelada has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Matteo
2. Surname (Last Name) Guelfi
3. Date 16-July-2018
4. Are you the corresponding author? ☑ No
   Corresponding Author's Name Jordi Vega
5. Manuscript Title
   ARTHROSCOPIC ALL-INSIDE ANTERIOR TALOFIBULAR LIGAMENT REPAIR THROUGH A THREE-PORTAL AND NO ANKLE DISTRACTION TECHNIQUE.
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Dr. Guelfi has nothing to disclose.

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<table>
<thead>
<tr>
<th>Given Name (First Name)</th>
<th>Surname (Last Name)</th>
<th>Date</th>
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<tbody>
<tr>
<td>Miki</td>
<td>Dalmau-Pastor</td>
<td>16-July-2018</td>
</tr>
</tbody>
</table>

4. Are you the corresponding author?  
   - Yes  
   - No  

   Corresponding Author’s Name: Jordi Vega

5. Manuscript Title  
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Dr. Dalmau-Pastor has nothing to disclose.

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1. Given Name (First Name) Fernando
2. Surname (Last Name) Peña
3. Date 16-July-2018
4. Are you the corresponding author? ☑️ No

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2. Surname (Last Name)
   Vega

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