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.

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4. **Intellectual Property.**

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

5. **Relationships not covered above.**

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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)  Dylan
2. Surname (Last Name)  Lowe
3. Date  16-March-2019

4. Are you the corresponding author?  No

5. Manuscript Title
   Repair of Tibial Plateau Fracture (Schatzker II)

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.)?  No

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Are there any relevant conflicts of interest?  No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  No
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Dr. Lowe has nothing to disclose.

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Gonzalez
# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Section 1. Identifying Information

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<th>1. Given Name (First Name)</th>
<th>2. Surname (Last Name)</th>
<th>3. Date</th>
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<tbody>
<tr>
<td>Leah</td>
<td>Gonzalez</td>
<td>16-March-2019</td>
</tr>
</tbody>
</table>

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

Corresponding Author's Name

| Kenneth Egol |

5. Manuscript Title

| Repair of Tibial Plateau Fracture (Schatzker II) |

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?  
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Are there any relevant conflicts of interest?  
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   - [x] No

## Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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Ms. Gonzalez has nothing to disclose.

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Michael

2. Surname (Last Name)  
   Milone

3. Date  
   17-March-2019

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

5. Manuscript Title  
   Repair of Tibial Plateau Fracture (Schatzker II)

6. Manuscript Identifying Number (if you know it)

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Dr. Milone has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Kenneth

2. Surname (Last Name)  
   Egol

3. Date  
   05-March-2019

4. Are you the corresponding author?  
   Yes ☑ No

5. Manuscript Title  
   Schatzker 2 Tibial Plateau Fracture

6. Manuscript Identifying Number (if you know it)

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Yes ☑ No

If yes, please fill out the appropriate information below.

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Orthopaedic Trauma Association: Board or Committee Member

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Dr. Egol reports personal fees and other from Exatech Inc., personal fees and other from SLACK Incorporated, non-financial support from Polypid, personal fees from Wolters Kluwer Health-LWW, grants from Synthes, outside the submitted work; and Orthopaedic Trauma Association: Board or Committee Member.

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