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)  
   Elisabeth

2. Surname (Last Name)  
   Ellingsen Husebye

3. Date  
   23-June-2019

4. Are you the corresponding author?  
   [ ] Yes  [x] No  
   Corresponding Author’s Name  
   Are Stødle

5. Manuscript Title  
   Open reduction and internal fixation of acute Lisfranc fracture/dislocation using dorsal bridging plates

6. Manuscript Identifying Number (if you know it)  
   ST-D-19-00009

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Dr. Ellingsen Husebye has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) 
Kjetil

2. Surname (Last Name) 
Hvaal

3. Date 
23-June-2019

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

Corresponding Author’s Name
Are Stødle

5. Manuscript Title
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   Marius

2. Surname (Last Name) 
   Molund

3. Date 
   23-June-2019

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

5. Manuscript Title 
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1. Given Name (First Name)  
   Fredrik  
2. Surname (Last Name)  
   Nilsen  
3. Date  
   23-June-2019  
4. Are you the corresponding author?  
   Yes   ✔  No  
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   Are

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   Stødle

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