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) Sreetha
2. Surname (Last Name) Sidharthan
3. Date 12-June-2019

4. Are you the corresponding author? ☑ No

Corresponding Author’s Name Daniel Green

5. Manuscript Title
Medial Patellofemoral Ligament (MPFL) Reconstruction in the Skeletally Immature Patient

6. Manuscript Identifying Number (if you know it)

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Sreetha Sidharthan has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
John

2. Surname (Last Name)  
Fulkerson

3. Date  
17-June-2019

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

Corresponding Author's Name  
Daniel Green

5. Manuscript Title  
Medial Patellofemoral Ligament (MPFL) Reconstruction in the Skeletally Immature Patient

6. Manuscript Identifying Number (if you know it)

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Author was the first to describe the MQTFL Reconstruction procedure in arthroscopy techniques. Nothing to disclose otherwise relevant to this presentation.

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Section 6. Disclosure Statement

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Dr. Fulkerson reports Author was the first to describe the MQTFL Reconstruction procedure in arthroscopy techniques. Nothing to disclose otherwise relevant to this presentation.

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Section 1. Identifying Information

1. Given Name (First Name)  Grace
2. Surname (Last Name)  Wang
3. Date  12-June-2019
4. Are you the corresponding author?  Yes  No
   Corresponding Author’s Name  Daniel Green
5. Manuscript Title  Medial Patellofemoral Ligament (MPFL) Reconstruction in the Skeletally Immature Patient
6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest?  Yes  No

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Section 1. Identifying Information

1. Given Name (First Name)  
   Lindsay

2. Surname (Last Name)  
   Schlichte

3. Date  
   12-June-2019

4. Are you the corresponding author?  
   □ Yes  ✔ No  
   Corresponding Author’s Name  
   Daniel Green

5. Manuscript Title  
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Section 1. Identifying Information

1. Given Name (First Name)  
Daniel

2. Surname (Last Name)  
Green

3. Date  
21-November-2019

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

5. Manuscript Title

Medial Patellofemoral Ligament (MPFL) Reconstruction in the Skeletally Immature Patient

6. Manuscript Identifying Number (if you know it)

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If yes, please fill out the appropriate information below.

<table>
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<tr>
<th>Name of Entity</th>
<th>Grant?</th>
<th>Personal Fees?</th>
<th>Non-Financial Support?</th>
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Dr. Green reports personal fees from Arthrex, personal fees from Pega Medical, outside the submitted work.

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