ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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**Section 1. Identifying Information**

<table>
<thead>
<tr>
<th>1. Given Name (First Name)</th>
<th>2. Surname (Last Name)</th>
<th>3. Date</th>
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<tbody>
<tr>
<td>Yoshihiro</td>
<td>Fukui</td>
<td>28-August-2017</td>
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4. Are you the corresponding author? [ ] Yes [x] No

<table>
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<tr>
<th>Corresponding Author’s Name</th>
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<tbody>
<tr>
<td>Kosaku Higashino</td>
</tr>
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</table>

5. Manuscript Title
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6. Manuscript Identifying Number (if you know it)
JBJSOA-D-17-00039

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

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Dr. Fukui has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  Fumio
2. Surname (Last Name)  Hayashi
3. Date  28-August-2017
4. Are you the corresponding author?  Yes ☑ No

Corresponding Author’s Name  Kosaku Higashino

5. Manuscript Title
Pulsation and collimation during fluoroscopy to decrease radiation: a cadaver study

6. Manuscript Identifying Number (if you know it)
JBJSOA-D-17-00039

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Higashino
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)       2. Surname (Last Name)       3. Date
   Kosaku                              Higashino                        28-August-2017

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

5. Manuscript Title
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Section 1. Identifying Information

1. Given Name (First Name)
   Hiroaki

2. Surname (Last Name)
   Hayashi

3. Date
   28-August-2017

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

   Corresponding Author’s Name
   Kosaku Higashino

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Definitions.
- **Entity**: government agency, foundation, commercial sponsor, academic institution, etc.
- **Grant**: A grant from an entity, generally [but not always] paid to your organization
- **Personal Fees**: Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations
- **Non-Financial Support**: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.
- **Other**: Anything not covered under the previous three boxes
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- **Issued**: The patent has been issued by the agency
- **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

Yamashita
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Kazuta
2. Surname (Last Name)  Yamashita
3. Date  28-August-2017
4. Are you the corresponding author?  Yes  No  ✔
   Corresponding Author’s Name  Kosaku Higashino
5. Manuscript Title  Pulsation and collimation during fluoroscopy to decrease radiation: a cadaver study
6. Manuscript Identifying Number (if you know it)  JBJSOA-D-17-00039

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.)?  Yes  No  ✔

Are there any relevant conflicts of interest?  Yes  No  ✔

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Section 6. Disclosure Statement

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Dr. Yamashita has nothing to disclose.

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