

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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#### 1. Identifying information.

#### 2. The work under consideration for publication.

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#### 4. Intellectual Property.

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

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### Section 1. Identifying Information

1. Given Name (First Name)

Assem

2. Surname (Last Name)

Sultan

3. Date

29-June-2018

4. Are you the corresponding author?

 Yes

 No

Corresponding Author's Name

Atul F. Kamath, MD

5. Manuscript Title

Operative Times have Remained Stable for Total Hip Arthroplasty over 15 Years: Systematic Review of 630,675 Procedures Supports Maintaining Current CPT Valuations

6. Manuscript Identifying Number (if you know it)

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### Section 1. Identifying Information

1. Given Name (First Name)

Atul

2. Surname (Last Name)

Kamath

3. Date

29-June-2019

4. Are you the corresponding author?

Yes  No

5. Manuscript Title

Operative Times have Remained Stable for Total Hip Arthroplasty over 15 Years: Systematic Review of 630,675 Procedures Supports Maintaining Current CPT Valuations

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If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Zimmer Biomet	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Research support, paid presenter or speaker, stock or stock options
DePuy Synthes	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Research support, paid presenter or speaker, paid consultant
Corin	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Paid presenter or speaker
Heraeus Medical	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Paid presenter or speaker, paid consultant
Pacira Pharmaceuticals	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Paid consultant
Johnson & Johnson	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Stock or stock options

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Innomed	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	IP royalties
AAOS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Board or committee member
AAHKS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Board or committee member
BMC Musculoskeletal Disorders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Editorial or governing board

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A.F.K. reports the following disclosures: research support (Zimmer Biomet, DePuy Synthes), paid presenter or speaker (Corin, DePuy Synthes, Heraeus Medical, and Zimmer Biomet), paid consultant (Pacira Pharmaceuticals, Heraeus Medical, DePuy Synthes, and Zimmer Biomet), stock or stock options (Zimmer Biomet, Johnson & Johnson, and Procter & Gamble), IP royalties (Innomed), board or committee member (AAOS and AAHKS), and editorial or governing board (BMC Musculoskeletal Disorders).

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Alexander

2. Surname (Last Name)  
Acuña

3. Date  
29-June-2018

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Yes  No

Corresponding Author's Name  
Atul F. Kamath, MD

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Linsen

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Samuel

3. Date  
29-June-2018

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Corresponding Author's Name  
Atul F. Kamath, MD

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William

2. Surname (Last Name)  
Cantrell

3. Date  
29-June-2018

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Yes  No

Corresponding Author's Name  
Atul F. Kamath, MD

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W.A.C. has nothing to disclose.

### Evaluation and Feedback

Please visit <http://www.icmje.org/cgi-bin/feedback> to provide feedback on your experience with completing this form.