

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) Thomas	2. Surname (Last Name) An	3. Date 28-October-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Dr. Jonathan Schoenecker
5. Manuscript Title Pediatric Musculoskeletal Infection: Hijacking the Acute Phase Response		
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? Yes No

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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Mr. An has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Michael	2. Surname (Last Name) Benvenuti	3. Date 16-October-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jonathan Schoenecker
5. Manuscript Title Pediatric Musculoskeletal Infection: Hijacking the Acute Phase Response		
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? Yes No

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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Mr. Benvenuti has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Megan	2. Surname (Last Name) Mignemi	3. Date 15-October-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jonathan Schoenecker
5. Manuscript Title Pediatric Musculoskeletal Infection: Hijacking the Acute Phase Response		
6. Manuscript Identifying Number (if you know it)		

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Dr. Mignemi has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Jonathan

2. Surname (Last Name)
Schoenecker

3. Date
15-October-2015

4. Are you the corresponding author? Yes No

5. Manuscript Title
Pediatric Musculoskeletal Infection: Hijacking the Acute Phase Response

6. Manuscript Identifying Number (if you know it)

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1. Given Name (First Name)

Isaac

2. Surname (Last Name)

Thomsen

3. Date

15-October-2015

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Jonathan Schoenecker

5. Manuscript Title

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