ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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## Section 1. Identifying Information

1. Given Name (First Name)  
Aakash  
  
2. Surname (Last Name)  
Chauhan  
  
3. Date  
02-November-2015  

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

Corresponding Author's Name  
Sam Akhavan  

5. Manuscript Title  
An Algorithm for Diagnosis and Management of Acute and Recurrent Patellar Instability  

6. Manuscript Identifying Number (if you know it)  

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## Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?  
☐ Yes  
☑ No  

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☑ No
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Dr. Chauhan 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)  Darren
2. Surname (Last Name)  Frank
3. Date  02-November-2015
4. Are you the corresponding author?  □ Yes  ✔ No
   Corresponding Author’s Name  Sam Akhavan
5. Manuscript Title
   An Algorithm for Diagnosis and Management of Acute and Recurrent Patellar Instability
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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If yes, please fill out the appropriate information below.

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<th>Name of Entity</th>
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<th>Non-Financial Support?</th>
<th>Other?</th>
<th>Comments</th>
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<td></td>
<td></td>
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Dr. Frank reports personal fees from Arthrex, Inc, outside the submitted work; .

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1. Given Name (First Name)  
   Patrick

2. Surname (Last Name)  
   DeMeo

3. Date  
   02-November-2015

4. Are you the corresponding author?  
   - [ ] Yes  
   - [X] No  
   Corresponding Author’s Name  
   Sam Akhavan

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1. Given Name (First Name)  
   Robert

2. Surname (Last Name)  
   Duerr

3. Date  
   02-November-2015

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

   Corresponding Author’s Name  
   Sam Akhavan

5. Manuscript Title  
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   Akhavan

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   02-November-2015

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   No

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