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)  
Mark

2. Surname (Last Name)  
Easley

3. Date  
16-September-2015

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

Corresponding Author’s Name
Christopher Gross

5. Manuscript Title  
Management of Avascular Necrosis of the Talus: A Critical Analysis Review

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

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
Yes ☐  No ☑
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Dr. Easley has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)  
   Jonathan

2. Surname (Last Name)  
   Frank

3. Date  
   16-September-2015

4. Are you the corresponding author?  
   ✔ No  
   Corresponding Author’s Name  
   Christopher Gross

5. Manuscript Title  
   Management of Avascular Necrosis of the Talus: A Critical Analysis Review

6. Manuscript Identifying Number (if you know it)

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Section 1. Identifying Information

1. Given Name (First Name)  
   Christopher  

2. Surname (Last Name)  
   Gross  

3. Date  
   16-September-2015  

4. Are you the corresponding author?  
   ✔ Yes  
   No  

5. Manuscript Title  
   Management of Avascular Necrosis of the Talus: A Critical Analysis Review  

6. Manuscript Identifying Number (if you know it)  

Section 2. The Work Under Consideration for Publication

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Dr. Gross has nothing to disclose.

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Holmes

1
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
George

2. Surname (Last Name)  
Holmes

3. Date  
16-September-2015

4. Are you the corresponding author?  
Yes ☐  No ☑  
Corresponding Author’s Name  
Christopher Gross

5. Manuscript Title  
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Dr. Holmes 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)  Robert
2. Surname (Last Name)    Sershon
3. Date                     30-January-2016
4. Are you the corresponding author?  
   - Yes  
   - No ✔
5. Manuscript Title          Treatment of Osteonecrosis of the Talus
6. Manuscript Identifying Number (if you know it)

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   - No ✔

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Dr. Sershon has nothing to disclose.

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