ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
Tae Won

2. Surname (Last Name)  
Kim

3. Date  
30-October-2015

4. Are you the corresponding author?  
☐ Yes  ☑ No  
Corresponding Author’s Name  
Dr. Mary Mulcahey

5. Manuscript Title  
Pigmented Villonodular Synovitis: A Comprehensive Literature Review and Proposed Treatment Algorithm

6. Manuscript Identifying Number (if you know it)

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Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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Section 6. Disclosure Statement
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Dr. Kim has nothing to disclose.

Evaluation and Feedback
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Lackman
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Richard

2. Surname (Last Name)  
   Lackman

3. Date  
   05-November-2015

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

   Corresponding Author’s Name  
   Dr. Mary Mulcahey

5. Manuscript Title  
   Pigmented Villonodular Synovitis: A Comprehensive Review and Proposed Treatment Algorithm

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest?  
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Are there any relevant conflicts of interest?  
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Dr. Lackman has nothing to disclose.

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<tr>
<td>Mary</td>
<td>Mulcahey</td>
<td>05-November-2015</td>
</tr>
</tbody>
</table>

4. Are you the corresponding author?  ✔ Yes  No

5. Manuscript Title
Pigmented Villonodular Synovitis: A Comprehensive Review and Proposed Treatment Algorithm

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### Section 1. Identifying Information

1. **Given Name (First Name)**
   - Brandon

2. **Surname (Last Name)**
   - Shallop

3. **Date**
   - 05-November-2015

4. **Are you the corresponding author?**
   - Yes [✓]

5. **Manuscript Title**
   - Pigmented Villonodular Synovitis: A Comprehensive Review and Proposed Treatment Algorithm

6. **Manuscript Identifying Number (if you know it)**

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<tr>
<td>Stephen</td>
<td>Stephan</td>
<td>05-November-2015</td>
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4. Are you the corresponding author? Yes [x] No

<table>
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Stephan has nothing to disclose.

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