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.

1. Identifying information.
2. The work under consideration for publication.
   
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3. Relevant financial activities outside the submitted work.
   
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   This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

5. Relationships not covered above.
   
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ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 1. Identifying Information**

1. Given Name (First Name)  Friedrich
2. Surname (Last Name)  Boettner
3. Date  22-March-2017
4. Are you the corresponding author?  Yes ☑ No

5. Manuscript Title  
   Femoral component sizing during total knee arthroplasty: Anterior versus posterior referencing

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  ☐

If yes, please fill out the appropriate information below.

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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?  Yes ☐ No  ☑

Boettner
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Dr. Boettner reports personal fees from OrthoDevelopment, personal fees from Smith & Nephew, personal fees from Depuy, outside the submitted work.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 1. Identifying Information**

1. Given Name (First Name)  
   Ryan  

2. Surname (Last Name)  
   Charette  

3. Date  
   22-March-2017  

4. Are you the corresponding author?  
   ✔ Yes  
   No  

5. Manuscript Title  
   Femoral component sizing during total knee arthroplasty: Anterior versus posterior referencing  

6. Manuscript Identifying Number (if you know it)  

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Dr. Charette has nothing to disclose.

Evaluation and Feedback

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### Identifying Information

1. Given Name (First Name)  
   Christopher

2. Surname (Last Name)  
   Melnic

3. Date  
   22-March-2017

4. Are you the corresponding author?  
   ✔ No

Corresponding Author’s Name  
   Ryan Charette

5. Manuscript Title  
   Femoral component sizing during total knee arthroplasty: Anterior versus posterior referencing

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Are there any relevant conflicts of interest?  
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Dr. Melnic 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) Giles
2. Surname (Last Name) Scuderi
3. Date 22-March-2017
4. Are you the corresponding author? Yes ☑ No
5. Manuscript Title
   Femoral component sizing during total knee arthroplasty: Anterior versus posterior referencing
6. Manuscript Identifying Number (if you know it)

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Dr. Scuderi reports personal fees from Zimmer Biomet, personal fees from Pacira, personal fees from Medtronic, outside the submitted work.

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<tr>
<td>Neil</td>
<td>Sheth</td>
<td>22-March-2017</td>
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</table>

4. Are you the corresponding author? [ ] Yes [ ] No

Corresponding Author's Name
Ryan Charette

5. Manuscript Title
Femoral component sizing during total knee arthroplasty: Anterior versus posterior referencing

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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