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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**Royalties:** Funds are coming in to you or your institution due to your patent
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Section 1. Identifying Information

1. Given Name (First Name)  Patrick
2. Surname (Last Name) Lee
3. Date 06-October-2017

4. Are you the corresponding author?  Yes  No

Corresponding Author’s Name
Paul Issack MD, PhD

5. Manuscript Title
Perioperative Considerations to Reduce Infection Risk in Primary Total Hip and Knee Arthroplasty

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Lee has nothing to disclose.

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Paul

2. Surname (Last Name)  
   Issack

3. Date  
   09-August-2017

4. Are you the corresponding author?  
   ✔ Yes  ❑ No

5. Manuscript Title  
   Perioperative Considerations to Reduce Infection Risk in Primary Total Hip and Knee Arthroplasty

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

**Section 3. Relevant financial activities outside the submitted work.**

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**Section 4. Intellectual Property -- Patents & Copyrights**

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Section 1. Identifying Information

1. Given Name (First Name)  Michael
2. Surname (Last Name)  DeRogatis
3. Date  07-August-2017

4. Are you the corresponding author?  Yes  No
Corresponding Author’s Name  Paul Issack MD, PhD

5. Manuscript Title
Perioperative Considerations to Reduce Infection Risk in Primary Total Hip and Knee Arthroplasty

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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Section 1. Identifying Information

1. Given Name (First Name)  Annalisse
2. Surname (Last Name)  Mahon
3. Date  09-August-2017
4. Are you the corresponding author?  Yes  No
Corresponding Author’s Name  Paul Issack MD, PhD
5. Manuscript Title
Perioperative Considerations to Reduce Infection Risk in Primary Total Hip and Knee Arthroplasty
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