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)  
   Alexander

2. Surname (Last Name)  
   Kuczmarski

3. Date  
   09-October-2017

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

5. Manuscript Title  
   Sensitivity of airport metal detectors to orthopedic implants

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Section 6. Disclosure Statement

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Mr. Kuczmarski has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)  
Joseph

2. Surname (Last Name)  
Gil

3. Date  
09-October-2017

4. Are you the corresponding author?  

Yes  No  ✔

Corresponding Author’s Name  
Alexander Kuczmarski

5. Manuscript Title  
Sensitivity of airport metal detectors to orthopedic implants

6. Manuscript Identifying Number (if you know it)

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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Are there any relevant conflicts of interest?  

Yes  No  ✔

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  

Yes  No  ✔
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Dr. Gil has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Andrew

2. Surname (Last Name)  
   Harris

3. Date  
   09-October-2017

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

Corresponding Author’s Name  
Alexander Kuczmarski

5. Manuscript Title  
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1. Given Name (First Name)        2. Surname (Last Name)  3. Date
Brett             Owens            09-October-2017

4. Are you the corresponding author? □ Yes    ✔ No  Corresponding Author's Name
                                                                 Alexander Kuczmarski

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