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)  
   Anna-Marie  
2. Surname (Last Name)  
   Francis  
3. Date  
   16-November-2017  
4. Are you the corresponding author?  
   ☐ Yes  
   ☑ No  
   Corresponding Author’s Name  
   Mandeep Virk  
5. Manuscript Title  
   Treatment of Adhesive Capsulitis of Shoulder: A Critical Analysis Review  
6. Manuscript Identifying Number (if you know it)  

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Anna-Marie Francis has nothing to disclose.

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<table>
<thead>
<tr>
<th>1. Given Name (First Name)</th>
<th>Andrew</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Surname (Last Name)</td>
<td>Rokito</td>
</tr>
<tr>
<td>3. Date</td>
<td>17-November-2017</td>
</tr>
<tr>
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</tr>
</tbody>
</table>

**Corresponding Author’s Name**
Mandeep virk

**Manuscript Title**
Treatment of Adhesive Capsulitis of Shoulder: A Critical Analysis Review

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

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Are there any relevant conflicts of interest? Yes | No

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Dr. Rokito has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
Joseph

2. Surname (Last Name)  
Zuckerman

3. Date  
17-November-2017

4. Are you the corresponding author?  
☑ No

5. Manuscript Title  
Treatment of Adhesive Capsulitis of Shoulder: A Critical Analysis Review

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Dr. Zuckerman has nothing to disclose.

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Virk
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1. Given Name (First Name)  
Mandeep

2. Surname (Last Name)  
Virk

3. Date  
16-November-2017

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

5. Manuscript Title  
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   Yip

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Corresponding Author’s Name  
Mandeep Virk

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**Grant:** A grant from an entity, generally [but not always] paid to your organization

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1. Given Name (First Name) Timothy
2. Surname (Last Name) Roberts
3. Date 18-November-2017
4. Are you the corresponding author? ☐ Yes ☑ No
   Corresponding Author’s Name Mandeep Virk
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Dr. Roberts has nothing to disclose.

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