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)  Mohamed
2. Surname (Last Name)  Awad
3. Date  09-February-2018

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

Corresponding Author’s Name  Dr. Khaled J. Saleh

5. Manuscript Title
Pharmacogenomics Testing before TKA and THA for Post-Operative Pain Optimization

6. Manuscript Identifying Number (if you know it)
REVIEWS-D-17-00184

Section 2. The Work Under Consideration for Publication

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**Section 6. Disclosure Statement**

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Dr. Awad has nothing to disclose.

**Evaluation and Feedback**

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# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Section 1. Identifying Information

| 1. Given Name (First Name) | Leila |
| 2. Surname (Last Name) | Abaab |
| 3. Date | 05-June-2018 |

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

<table>
<thead>
<tr>
<th>Corresponding Author’s Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Khaled J. Saleh</td>
</tr>
</tbody>
</table>

5. Manuscript Title

Pharmacogenomics Testing for Postoperative Pain Optimization Before Total Knee and Total Hip Arthroplasty

6. Manuscript Identifying Number (if you know it)

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Dr. Abaab 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)  Mouhanad
2. Surname (Last Name) El-Othmani
3. Date  09-February-2018
4. Are you the corresponding author?  Yes  No
   Corresponding Author’s Name
   Dr. Khaled J. Saleh
5. Manuscript Title
   Pharmacogenomics Testing before TKA and THA for Post-Operative Pain Optimization
6. Manuscript Identifying Number (if you know it)
   REVIEWS-D-17-00184

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Dr. El-Othmani has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  Muhammad
2. Surname (Last Name)  Padela
3. Date  09-February-2018

4. Are you the corresponding author?  Yes  No  ✔  Corresponding Author’s Name  Dr. Khaled J. Saleh

5. Manuscript Title  Pharmacogenomics Testing before TKA and THA for Post-Operative Pain Optimization

6. Manuscript Identifying Number (if you know it)  REVIEWS-D-17-00184

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Dr. Padela has nothing to disclose.

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1. Given Name (First Name)  
   Khaled

2. Surname (Last Name)  
   Saleh

3. Date  
   09-February-2018

4. Are you the corresponding author?  
   ✔ Yes

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

**Personal Fees**: Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

**Non-Financial Support**: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

**Other**: Anything not covered under the previous three boxes

**Pending**: The patent has been filed but not issued

**Issued**: The patent has been issued by the agency

**Licensed**: The patent has been licensed to an entity, whether earning royalties or not

**Royalties**: Funds are coming in to you or your institution due to your patent
# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Section 1. Identifying Information

<table>
<thead>
<tr>
<th>1. Given Name (First Name)</th>
<th>Zain</th>
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</thead>
<tbody>
<tr>
<td>2. Surname (Last Name)</td>
<td>Sayeed</td>
</tr>
<tr>
<td>3. Date</td>
<td>09-February-2018</td>
</tr>
<tr>
<td>4. Are you the corresponding author?</td>
<td>No</td>
</tr>
<tr>
<td>Corresponding Author’s Name</td>
<td>Dr. Khaled J. Saleh</td>
</tr>
<tr>
<td>5. Manuscript Title</td>
<td>Pharmacogenomics Testing before TKA and THA for Post-Operative Pain Optimization</td>
</tr>
<tr>
<td>6. Manuscript Identifying Number (if you know it)</td>
<td>REVIEWS-D-17-00184</td>
</tr>
</tbody>
</table>

## 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? No

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

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the “Add +” box. You should report relationships that were present during the 36 months prior to publication.

Are there any relevant conflicts of interest? No

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

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? No
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

☐ Yes, the following relationships/conditions/circumstances are present (explain below):

☑ No other relationships/conditions/circumstances that present a potential conflict of interest

At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Sayeed has nothing to disclose.

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