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.
   This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking “No” means that you did the work without receiving any financial support from any third party — that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check “Yes”.

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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)
   Stacy

2. Surname (Last Name)
   Rumfelt

3. Date
   10-December-2018

4. Are you the corresponding author?  
   ✔ Yes   No

5. Manuscript Title
   Team Approach: Modern Day Prosthetics in the Mangled Hand

6. Manuscript Identifying Number (if you know it)
   REVIEWS-D-18-00162R1

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?  
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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?  
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Stacy Rumfelt has nothing to disclose.

Evaluation and Feedback

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<tr>
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<th>2. Surname (Last Name)</th>
<th>3. Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brian</td>
<td>Monroe</td>
<td>06-December-2018</td>
</tr>
</tbody>
</table>

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

5. Manuscript Title

Team Approach: Modern Day Prosthetic in the Mangled Hand

6. Manuscript Identifying Number (if you know it)

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## 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.)?

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Are there any relevant conflicts of interest? [ ] Yes [x] No

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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 [x] No
ICMJE Form for Disclosure of Potential Conflicts of Interest

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Section 6. Disclosure Statement

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Brian Monroe has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name) Bryan
2. Surname (Last Name) Loeffler
3. Date 09-December-2018
4. Are you the corresponding author? ☑ Yes  ☐ No
5. Manuscript Title Team Approach: Modern Day Prosthetics in the Mangled Hand
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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Are there any relevant conflicts of interest? ☑ Yes  ☐ No
If yes, please fill out the appropriate information below.

<table>
<thead>
<tr>
<th>Name of Entity</th>
<th>Grant?</th>
<th>Personal Fees?</th>
<th>Non-Financial Support?</th>
<th>Other?</th>
<th>Comments</th>
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<tr>
<td>Consultant for Hanger Clinic</td>
<td>☐</td>
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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
If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.
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<td>✔️</td>
<td>❌</td>
<td>❌</td>
<td>❌</td>
<td>❌</td>
<td>❌</td>
<td>Patent for technique to allow individual digital control of a myoelectric prosthesis.</td>
</tr>
</tbody>
</table>

**Section 5. Relationships not covered above**

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

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**Section 6. Disclosure Statement**

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Dr. Loeffler reports personal fees from Consultant for Hanger Clinic, outside the submitted work; in addition, Dr. Loeffler has a patent Myoelectric Prosthesis and Method pending.

**Evaluation and Feedback**

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Section 1. Identifying Information

1. Given Name (First Name) Raymond
2. Surname (Last Name) Gaston
3. Date 13-December-2018
4. Are you the corresponding author? ✔ Yes □ No

5. Manuscript Title
TeamApproach: Modern Day Prosthetics in the Mangled Hand

6. Manuscript Identifying Number (if you know it)
REVIEWS-D-18-00162_R1-4

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We do educational speaking for the Hanger clinic and offer a visiting professor program for our amputee clinic supported by the Hanger clinic.

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Dr. Gaston reports In addition, Dr. Gaston has a patent Starfish Procedure issued and We do educational speaking for the Hanger clinic and offer a visiting professor program for our amputee clinic supported by the Hanger clinic.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. **Given Name (First Name)**
   - Matthew

2. **Surname (Last Name)**
   - Delarosa

3. **Date**
   - 06-December-2018

4. **Are you the corresponding author?**
   - Yes

5. **Manuscript Title**
   - Team Approach: Modern Day Prosthetics in the Mangled Hand

6. **Manuscript Identifying Number (if you know it)**
   - REVIEWS-D-18-00162

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- No

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Dr. Delarosa has nothing to disclose.

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