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) Ian
2. Surname (Last Name) Isby
3. Date 29-Novermber-2018
4. Are you the corresponding author? ☑ No

Corresponding Author’s Name Jeremy Somerson, MD

5. Manuscript Title
   DOES THE MENSTRUAL CYCLE AFFECT ANTERIOR KNEE LAXITY AND RATE OF ACL TEAR? A SYSTEMATIC REVIEW AND META-ANALYSIS.
6. Manuscript Identifying Number (if you know it)

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Mr. Isby has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  Albert  
2. Surname (Last Name)  Gee  
3. Date  04-December-2018  
4. Are you the corresponding author?  ☑ No  
   Corresponding Author’s Name  Jeremy S. Somerson, MD

5. Manuscript Title  
   DOES THE MENSTRUAL CYCLE AFFECT ANTERIOR KNEE LAXITY AND RATE OF ACL TEAR? A SYSTEMATIC REVIEW AND META-ANALYSIS.

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### Section 1. Identifying Information

1. **Given Name (First Name)**  
   Mia

2. **Surname (Last Name)**  
   Hagen

3. **Date**  
   04-December-2018

4. **Are you the corresponding author?**  
   - Yes
   - No  
   ✔

**Corresponding Author’s Name**  
Jeremy S. Somerson, MD

5. **Manuscript Title**  
DOES THE MENSTRUAL CYCLE AFFECT ANTERIOR KNEE LAXITY AND RATE OF ACL TEAR? A SYSTEMATIC REVIEW AND META-ANALYSIS.

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Dr. Hagen has nothing to disclose.

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1. Given Name (First Name)  
   Christopher

2. Surname (Last Name)  
   Kweon

3. Date  
   04-December-2018

4. Are you the corresponding author?  
   ✔ No

   Corresponding Author’s Name  
   Jeremy S. Somerson

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Dr. Kweon has nothing to disclose.

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1. Given Name (First Name)  
   Jeremy

2. Surname (Last Name)  
   Somerson

3. Date  
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If yes, please fill out the appropriate information below.

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Dr. Somerson reports other from DJO Surgical, other from Smith and Nephew, other from Lifenet Vivigen, other from DePuy, other from Tornier, other from Zimmer Biomet, other from KCI, outside the submitted work.

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