ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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1. Identifying information.
2. The work under consideration for publication.
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   This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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**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**

1. Given Name (First Name)  
   Blake

2. Surname (Last Name)  
   Meza

3. Date  
   30-May-2019

4. Are you the corresponding author?  
   ☑ No

   Corresponding Author’s Name  
   Ishaan Swarup

5. Manuscript Title  
   Septic Arthritis of the Knee in Children: A Critical Analysis Review

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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Blake Meza has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)  
   Keith

2. Surname (Last Name)  
   Baldwin

3. Date  
   30-May-2019

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

   Corresponding Author’s Name  
   Ishaan Swarup

5. Manuscript Title  
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Dr. Baldwin has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name)  
   Asmita

2. Surname (Last Name)  
   Jina

3. Date  
   04-June-2019

4. Are you the corresponding author?  
   ✔ No

5. Manuscript Title  
   Septic Arthritis of the Knee in Children: A Critical Analysis Review

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Dr. Jina has nothing to disclose.

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<table>
<thead>
<tr>
<th>1. Given Name (First Name)</th>
<th>2. Surname (Last Name)</th>
<th>3. Date</th>
</tr>
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<tbody>
<tr>
<td>John T.</td>
<td>Lawrence</td>
<td>30-May-2019</td>
</tr>
</tbody>
</table>

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

5. Manuscript Title  
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Dr. Lawrence has nothing to disclose.

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Swarup
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information
1. Given Name (First Name)  
Ishaan
2. Surname (Last Name)  
Swarup
3. Date  
06-June-2019
4. Are you the corresponding author?  
✔ Yes  ☐ No
5. Manuscript Title  
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Dr. Swarup has nothing to disclose.

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Royalties: Funds are coming in to you or your institution due to your patent
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1. Given Name (First Name) Daniel
2. Surname (Last Name) Weltsch
3. Date 30-May-2019
4. Are you the corresponding author? Yes ☐ No ☑
   Corresponding Author’s Name Ishaan Swarup
5. Manuscript Title
   Septic Arthritis of the Knee in Children: A Critical Analysis Review
6. Manuscript Identifying Number (if you know it)

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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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Dr. Weltsch has nothing to disclose.

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