

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.

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Royalties: Funds are coming in to you or your institution due to your patent

Marsh 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi	rst Name)	2. Surname (Last Name) Marsh	3. Date 19-October-2016
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Terrance Peabody
5. Manuscript Title Can We Agree or		essments of Graduating Re	esidents?
6. Manuscript Ider JBJS-D-16-01048	ntifying Number (if you kr BR1	now it)	
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Section 2.	The Work Under C	onsideration for Public	cation
any aspect of the s statistical analysis,	ubmitted work (including	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,
Section 3.	Relevant financial	activities outside the s	ubmitted work.
of compensation clicking the "Add) with entities as descr	ibed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by se present during the 36 months prior to publication.
Section 4.	Intellectual Prope	rty Patents & Copyric	yhts
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No

Marsh 2



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Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of ncing, what you wrote in the submitted work?
✓ Yes, the follow	wing relationships/conditions/circumstances are present (explain below):
No other rela	tionships/conditions/circumstances that present a potential conflict of interest
	e production of this article, I was a member of the ACGME Residency Review Committee for orthopedics and American Board of Orthopedic Surgeons.
On occasion, jou	nuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements rals may ask authors to disclose further information about reported relationships.
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•	s and At the time of the production of this article, I was a member of the ACGME Residency Review rthopedics and President of the American Board of Orthopedic Surgeons

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Royalties: Funds are coming in to you or your institution due to your patent

Nousiainen 1



1. Given Name (First Name) Markku 2. Surname (Last Name) Nousiainen 3. Date 17-October-2016 4. Are you the corresponding author? Yes V No Corresponding Author's Name T. Peabody 5. Manuscript Title Abstract AOA symposium 2016: Can We Agree on Expectations and Assessments of Graduating Residents 6. Manuscript Identifying Number (if you know it)
T. Peabody 5. Manuscript Title Abstract AOA symposium 2016: Can We Agree on Expectations and Assessments of Graduating Residents
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6. Manuscript Identifying Number (if you know it)
JBJS-D-16-01048
Section 2. The Work Under Consideration for Publication
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. Polovant financial activities outside the submitted work
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?
If yes, please fill out the appropriate information below.
2 Parrowal New Financial
Name of Entity Grant? Personal Non-Financial Other? Comments Commen
Zimmer Biomet
Stryker
DePuy Synthes
Section 4. Intellectual Property Patents & Copyrights

Nousiainen 2



Section 5.	
Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements rnals may ask authors to disclose further information about reported relationships.
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Dr. Nousiainen r the submitted w	eports personal fees from Zimmer Biomet, personal fees from Stryker, grants from DePuy Synthes, outside rork; .

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peabody 1



Section 1. Identifying Inform	nation	
Given Name (First Name) terrance	2. Surname (Last Name) peabody	3. Date 12-August-2016
4. Are you the corresponding author?	✓ Yes No	
5. Manuscript Title AOA Symposium: Can We Agree on Ex	pectations and Assessments of Gr	aduating Residents
6. Manuscript Identifying Number (if you k	now it)	
Section 2. The Work Under (Consideration for Publication	
	g but not limited to grants, data mon	party (government, commercial, private foundation, etc.) for itoring board, study design, manuscript preparation,
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Section 4. Intellectual Prop	erty Patents & Copyrights	
Do you have any patents, whether pla	nned, pending or issued, broadly	relevant to the work? Yes V No

peabody 2



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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?
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No other relationships/conditions/circumstances that present a potential conflict of interest
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Dr. Peabody has nothing to disclose.

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Incoll 1



Section 1.	Identifying Inform	ation		
1. Given Name (Fire	st Name)	2. Surname (Last Name) Incoll		3. Date 20-October-2016
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Terence Peabody	
5. Manuscript Title Abstract AOA syn	nposium 2016: Can We	e Agree on Expectations ar	nd Assessments of Graduating	g Residents?
6. Manuscript Iden JBJS-D-16-01048	tifying Number (if you kr	now it)		
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any aspect of the su statistical analysis, e Are there any rele	ıbmitted work (including	but not limited to grants, da	a third party (government, comi ta monitoring board, study desi	mercial, private foundation, etc.) for gn, manuscript preparation,
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Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work?	☐ Yes 🗸 No

Incoll 2



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