

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Eric

2. Surname (Last Name)

Bluman

3. Date

11-September-2015

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Christopher Chiodo

5. Manuscript Title

Patient Compliance with Postoperative Lower Extremity Non-Weight-Bearing Restrictions

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?

☐ Yes

☒ No

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Are there any relevant conflicts of interest?

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☒ No

Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Bluman 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)
Christopher

2. Surname (Last Name)
Chiodo

3. Date
27-August-2015

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

5. Manuscript Title
Patient Compliance with Postoperative Lower Extremity Non-Weight-Bearing Restrictions

6. Manuscript Identifying Number (if you know it)
Unknown

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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.

Patent?	Pending?	Issued?	Licensed?	Royalties?	Licensee?	Comments
7506543	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No	Not commercialized

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Dr. Chiodo reports In addition, Dr. Chiodo has a patent 7506543 issued to No.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) David	2. Surname (Last Name) Palms	3. Date 25-August-2015
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Christopher Chiodo
5. Manuscript Title Patient Compliance with Postoperative Lower Extremity Non-Weight-Bearing Restrictions		
6. Manuscript Identifying Number (if you know it) Unknown		

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Jeremy	2. Surname (Last Name) Smith	3. Date 24-August-2015
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Christopher Chiodo
5. Manuscript Title Patient Compliance with Postoperative Lower Extremity Non-Weight-Bearing Restrictions		
6. Manuscript Identifying Number (if you know it) Unknown		

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Dr. Smith has nothing to disclose.

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Section 1. Identifying Information

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Alec

2. Surname (Last Name)

Macaulay

3. Date

13-August-2015

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name

Christopher Chiodo

5. Manuscript Title

Patient Compliance with Postoperative Lower Extremity Non-Weight-Bearing Restrictions

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