

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.

Identifying information.

2. The work under consideration for publication.

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3. Relevant financial activities outside the submitted work.

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4. Intellectual Property.

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

Relationships not covered above.

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Other: Anything not covered under the previous three boxes

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

Ireland 1



Section 1.	Identifying Inform	nation				
Given Name (Fire Mary Lloyd	st Name)	2. Surname (Last Name) Ireland	3. Date 13-April-2016			
4. Are you the corr	4. Are you the corresponding author?		Corresponding Author's Name Brian Noehren			
5. Manuscript Title Cellular and morp		n the vastus lateralis mus	cle as the result of an ACL injury and reconstruction			
6. Manuscript Iden	tifying Number (if you kr	now it)				
			_			
Section 2.	Section 2. The Work Under Consideration for Publication					
any aspect of the su statistical analysis, e	ubmitted work (including	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,			
Section 3.	Relevant financial	activities outside the :	submitted work.			
of compensation) clicking the "Add) with entities as descri	bed in the instructions. Use port relationships that we	nether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication .			
Section 4.	Intellectual Proper	ty Patents & Copyri	ghts			
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo						

Ireland 2



Section 5. Relationships not severed above
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Section 6. Disclosure Statement
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Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Ireland has nothing to disclose.

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

Damon 1



Section 1. Identifying	Information					
Given Name (First Name) Bruce	2. Surname (Last Name) Damon	3. Date 13-April-2016				
4. Are you the corresponding author	or? Yes 🗸 No	Corresponding Author's Name Brian Noehren				
5. Manuscript Title Cellular and morphological alter	rations in the vastus lateralis musc	cle as the result of an ACL injury and reconstruction				
6. Manuscript Identifying Number (if you know it)					
		-				
Section 2. The Work Ur	Section 2. The Work Under Consideration for Publication					
	ncluding but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ita monitoring board, study design, manuscript preparation,				
Section 3. Relevant fina	ancial activities outside the s	submitted work.				
of compensation) with entities a	s described in the instructions. Us ould report 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 re present during the 36 months prior to publication.				
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Do you have any patents, wheth	er planned, pending or issued, br	oadly relevant to the work? Yes V No				

Damon 2



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

Andersen 1



Section 1.	Identifying Inform	nation		
Given Name (First Name) Anders		2. Surname (Last Name) Andersen		3. Date 15-December-2015
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Brian Noehren	
5. Manuscript Title Cellular and mor		in the vastus lateralis musc	cle as the result of an ACL inju	ry and reconstruction
6. Manuscript Ider	ntifying Number (if you kr	now it)		
			-	
Section 2.	The Work Under Co	onsideration for Public	ation	
any aspect of the s statistical analysis,	ubmitted work (including	g but not limited to grants, da	a third party (government, comn ta monitoring board, study desig	nercial, private foundation, etc.) for yn, manuscript preparation,
Section 3.	Polovant financial	activities outside the s	ubmitted work	
Place a check in tool compensation clicking the "Add	the appropriate boxes i) with entities as descri	in the table to indicate who ibed in the instructions. Us port relationships that wer	ether you have financial relati	onships (regardless of amount d as many lines as you need by nths prior to publication.
Section 4.	Intellectual Proper	rty Patents & Copyric	ıhts	
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? [Yes 🗸 No

Andersen 2



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Dr. Andersen has nothing to disclose.

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Noehren 1



Section 1.	dentifying Inform	ation				
1. Given Name (First Brian		2. Surname (Last Nar Noehren	ne)		3. Date 11-January-	-2016
4. Are you the corres	ponding author?	✓ Yes No				
5. Manuscript Title Cellular and morph	nological alterations in	n the vastus lateralis	muscle as the re	sult of an ACL	injury and reco	onstruction
6. Manuscript Identif	fying Number (if you kn	ow it)				
Section 2.	he Work Under Co	onsideration for P	ublication			
any aspect of the sub statistical analysis, etc	mitted work (including c.)?	but not limited to grar	its, data monitorin			rate foundation, etc.) for ipt preparation,
If yes, please fill out		rmation below. If yo	No u have more tha	n one entity p	ress the "ADD"	button to add a row.
Name of Institution	removed by pressing	Grant? Personal		Other? Co	omments	
NIH		Fees •	Support •			
Section 3.	elevant financial a	activities outside	the submitted	work.		l.
Place a check in the of compensation) v clicking the "Add +	e appropriate boxes in vith entities as descril " box. You should rep	n the table to indicat bed in the instruction ort relationships tha	e whether you h ns. Use one line f t were present c	ave financial r or each entity	; add as many l	lines as you need by
Are there any releva	ant conflicts of intere	st?	INO			
Section 4.	. !! !		• 1.			
	ntellectual Proper					
Do you have any pa	atents, whether planr	ned, pending or issue	ed, broadly releva	ant to the wor	k? Yes	✓ No

Noehren 2



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Dr. Noehren reports grants from NIH, during the conduct of the study; .

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Noehren 3



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Johnson 1



Section 1. Identifying Info	rmation					
1. Given Name (First Name) Darren	2. Surname (Last Name) Johnson	3. Date 13-April-2016				
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Brian Noehren				
5. Manuscript Title "Cellular and morphological alteration	ons in the vastus lateralis mus	scle as the result of an ACL injury and reconstruction"				
6. Manuscript Identifying Number (if you	ı know it)					
		_				
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Johnson 2



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Thompson 1



Section 1. Identifying Inform	nation					
1. Given Name (First Name) Katherine	2. Surname (Last Name) Thompson	3. Date 18-December-2015				
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name				
5. Manuscript Title Cellular and morphological alterations	in the vastus lateralis musc	cle as the result of an ACL injury and reconstruction				
6. Manuscript Identifying Number (if you kr	now it)					
Section 2. The Work Under Co	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	e there any relevant conflicts of interest? Yes 🗸 No					
	Section 2					
Section 3. Relevant financial	activities outside the s	ubmitted work.				
of compensation) with entities as descr	ibed in the instructions. Us	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.				
Are there any relevant conflicts of interest	est?					
Section 4. Intellectual Proper	rty Patents & Copyrig	hts				
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo						

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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
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements On occasion, journals may ask authors to disclose further information about reported relationships.
Section 6. Disclosure Statement
Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Thompson has nothing to disclose.

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.

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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.

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".

3. Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

4. Intellectual Property.

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

Relationships not covered above.

Use this section to report 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.

Definitions.

Entity: government agency, foundation, commercial sponsor, academic institution, etc.

Grant: A grant from an entity, generally [but not always] paid to your organization

Personal Fees: Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

Non-Financial Support: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

Other: Anything not covered under the previous three boxes

Pending: The patent has been filed but not issued

Issued: The patent has been issued by the agency

Licensed: The patent has been licensed to an entity, whether earning royalties or not

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

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Section 1.	Identifying Inform	nation			
1. Given Name (First Name) Peter		2. Surname (Last Name) Hardy		3. Date 16-December-2015	
4. Are you the corresponding author?		☐ Yes ✓ No	Corresponding Author's Nar Brian Noehren, PT, PhD	me	
5. Manuscript Title Cellular and morphological alterations in the vastus lateralis muscle as the result of an ACL injury and reconstruction					
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					
Continu 2					
Section 3.	Relevant financial	activities outside the s	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? Yes Vo					
Section 4.	Intellectual Proper	rty Patents & Copyrig	ghts		
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo					

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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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Evaluation and Feedback

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