

#### **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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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

Anthony 1



Section 1.	Identifying Inform	nation			
1. Given Name (Fi lain	rst Name)	2. Surname (Last Nam Anthony	e)	3. Date 21-Septem	nber-2015
4. Are you the cor	responding author?	☐ Yes ✓ No	Corresponding	g Author's Name	
prospective rand		dy	sisted unicompartn	mental knee arthroplast	y: data from a
Section 2.	The Work Under Co	onsideration for Pu	blication		
any aspect of the s statistical analysis, Are there any rel- If yes, please fill o	ubmitted work (including etc.)? evant conflicts of intere	s but not limited to grant est?  Yes  Normation below. If you g the "X" button.	s, data monitoring bo	vernment, commercial, pri pard, study design, manusc ne entity press the "ADD	cript preparation,
Name of Institut	ion/Company	Grant? Personal Fees?	Non-Financial Ot Support?	ther? Comments	
MAKO Surgical Corpo	pration	<b>✓</b>			
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Section 3.	Relevant financial	activities outside t	he submitted wo	rk.	
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Section 4.	Intellectual Proper	ty Patents & Cop	yri <mark>ghts</mark>		
Do you have any	patents, whether plan	ned, pending or issued	d, broadly relevant t	to the work? Yes	✓ No

Anthony 2



Section 5. Polationships not sovered above
Relationships not covered above
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Yes, the following relationships/conditions/circumstances are present (explain below):
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Dr. Anthony reports grants from MAKO Surgical Corporation, during the conduct of the study; .

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Bell 1



Section 1.	Identifying Inform	nation				
1. Given Name (Fi Stuart		2. Surname (Last Nam Bell	ne)		3. Date 21-September-2015	
4. Are you the cor	responding author?	✓ Yes No				
•		•	ssisted unicomp	artmental kno	ee arthroplasty: data from a	
6. Manuscript Idei	ntifying Number (if you kr	now it)				
Section 2.	The Work Under Co	onsideration for Pu	ublication			
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If yes, please fill o		ormation below. If you	No I have more tha	n one entity p	ress the "ADD" button to ad	ld a row.
	be removed by pressing	g the "X" button.  Grant?  Personal	Non-Financial	7 6		
Name of Institut		Fees?	Support?	Other C	omments	
MAKO Surgical Corpo	oration	<b>✓</b>				
Section 3.	Relevant financial	activities outside t	he submitted	work.		
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Section 4.	Intellectual Proper	ty Patents & Cop	yrights			
Do you have any	patents, whether plan	ned, pending or issue	d, broadly releva	ant to the wo	k? Yes 🗸 No	

Bell 2



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Blyth 1



Section 1.	Identifying Inform	ation				
1. Given Name (Fi Mark	rst Name)	2. Surnar Blyth	ne (Last Name)			3. Date 21-September-2015
4. Are you the cor	responding author?	Yes	✓ No	Correspon Stuart Bel	-	or's Name
			h robotic assis	ted unicomp	artmenta	ll knee arthroplasty: data from a
6. Manuscript Idei	ntifying Number (if you kr	now it)				
Section 2.	The Work Under Co	onsidera	tion for Publ	ication		
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Name of Institut	ion/Company	Grant?	_	on-Financial Support <mark>?</mark>	Other?	Comments
MAKO Surgical Corpo	oration	<b>✓</b>				
MAKO Surgical Corpo	pration		<b>✓</b>			Single lecture given at teaching course
MAKO Surgical Corpo	oration			<b>✓</b>		Surgical training
Section 3.	Relevant financial	activities	outside the	submitted	work.	
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Do you have any	patents, whether plan	ned, pendi	ng or issued, k	oroadly releva	ant to the	work? Yes V

Blyth 2



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Jones 1



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1. Given Name (Fi Bryn	rst Name)	2. Surnar Jones	ne (Last Name)			3. Date 21-September-2015
4. Are you the cor	responding author?	Yes	<b>✓</b> No	Correspon Stuart Be	_	or's Name
			h robotic assis	sted unicomp	artmenta	l knee arthroplasty: data from a
6. Manuscript Ider	ntifying Number (if you kr	now it)				
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Name of Institut	ion/Company	Grant?		on-Financial Support <mark>?</mark>	Other?	Comments
MAKO Surgical Corpo	pration	<b>✓</b>				
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Section 3.	Relevant financial	activities	outside the	submitted	work.	
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Do you have any	patents, whether plan				ant to the	work? Yes Vo

Jones 2



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MacLean 1



Section 1.	Identifying Inform	ation				
1. Given Name (Fii Angus		2. Surname (Last MacLean	Name)		3. Date 21-September-2015	
4. Are you the cor	responding author?	☐ Yes ✓ N	lo Correspor Stuart Be	nding Author's N ell	lame	
prospective rand	acy of component posit domised controlled stud	dy	tic assisted unicomp	oartmental kne	e arthroplasty: data from a	
6. Manuscript ider	ntifying Number (if you kn	ow it)				
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	ubmitted work (including			•	commercial, private foundation, etc.) fo design, manuscript preparation,	or
	evant conflicts of intere		No			
	out the appropriate info be removed by pressing		you have more tha	n one entity pi	ress the "ADD" button to add a rov	٧.
Name of Institut		Grant? Perso	2 2	Other? Co	omments	
MAKO Surgical Corpo	pration	<b>✓</b>				_
MAKO Surgical Corpo	oration		<b>✓</b>	Surg	gical training	
Section 3.	Relevant financial	activities outsi	de the submitted	l work.		
of compensation	n) with entities as descri	bed in the instru	ctions. Use one line	for each entity;	elationships (regardless of amount ; add as many lines as you need by months prior to publication.	
Are there any rel	evant conflicts of intere	est? Yes	<b>√</b> No			
Section 4.	Intellectual Proper	tv Patents &	Copyrights			
Do you have any	patents, whether planr		., .	ant to the wor	k? ☐ Yes 📝 No	

MacLean 2



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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) Philip	2. Surname (Last Name) Rowe		3. Date 21-September-2015
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Autho Stuart Bell	r's Name
5. Manuscript Title Improved accuracy of component posit prospective randomised controlled students.	dy	ed unicompartmental	knee arthroplasty: data from a
6. Manuscript Identifying Number (if you kr	iowit)		
Section 2. The Work Under Co	onsideration for Public	ration	
Did you or your institution <b>at any time</b> rece any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	ive payment or services from g but not limited to grants, da	a third party (governme	
If yes, please fill out the appropriate info Excess rows can be removed by pressin	ormation below. If you hav	e more than one entit	ry press the "ADD" button to add a row.
Name of Institution/Company	Grant	n-Financial other?	Comments
MAKO Surgical Corporation	<b>V</b>		
Section 3. Relevant financial	activities outside the s	submitted work.	
Place a check in the appropriate boxes i of compensation) with entities as descri clicking the "Add +" box. You should rep Are there any relevant conflicts of interes	ibed in the instructions. Us port relationships that wer	se one line for each en	tity; add as many lines as you need by
Section 4. Intellectual Proper			
Intellectual Proper	rty Patents & Copyric	ghts	
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the v	work? Yes V No

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Section 5. Polationships not severed above
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
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Rowe reports grants from MAKO Surgical Corporation, during the conduct of the study; .

#### **Evaluation and Feedback**

Please visit <a href="http://www.icmje.org/cgi-bin/feedback">http://www.icmje.org/cgi-bin/feedback</a> to provide feedback on your experience with completing this form.

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