

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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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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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

Malkani 1



Section 1. Identifying Inform	ation		
1. Given Name (First Name) Arthur	2. Surname (Last Name) Malkani		3. Date 20-April-2015
4. Are you the corresponding author?	☐ Yes 🗸 No	Corresponding Autho	or's Name
5. Manuscript Title Bariatric Orthopaedics: Total Hip Arthro	plasty in the Super-obese	e patients (BMI >50 kg/	(m2)
6. Manuscript Identifying Number (if you kn	now it)		
Section 2. The Work Under Co	onsideration for Publi	cation	
Did you or your institution at any time receivany aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of interest.	but not limited to grants, d		
Section 3. Relevant financial	activities outside the	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 intere	bed in the instructions. Uport relations hat we	se one line for each en	itity; add as many lines as you need by
If yes, please fill out the appropriate info	ormation below.		
Name of Entity	Grant	n-Financial Other?	Comments
stryker			IP royalties; Paid consultant; Paid presenter or speaker
synthesstryker	✓		Research support
Section 4. Intellectual Proper	ty Patents & Copyri	ghts	
Do you have any patents, whether plan	ned, pending or issued, b	roadly relevant to the	work? Yes V No

Malkani 2



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	Yes, the following relationships/conditions/circumstances are present (explain below):				
✓ No other relat	tionships/conditions/circumstances that present a potential conflict of interest				
	nuscript 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.				
Section 6.	Disclosure Statement				
Based on the abo	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box				
Dr. Malkani repo	rts personal fees from stryker, grants from synthesstryker, outside the submitted work; .				

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Malkani 3



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Scillia 1



Section 1.	Identifying Inform	ation		
1. Given Name (Firs Anthony	t Name)	2. Surname (Last Name) Scillia	3. Date 20-April-2015	
4. Are you the corre	esponding author?	Yes ✓ No	Corresponding Author's Name Michael Mont	
5. Manuscript Title Bariatric Orthopae	edics: Total Hip Arthro	plasty in the Super-obese	patients (BMI >50 kg/m2)	
6. Manuscript Ident	ifying Number (if you kn	ow it)		
Section 2.	The Work Under Co	onsideration for Publi	cation	
any aspect of the su statistical analysis, e	bmitted work (including	but not limited to grants, do	a third party (government, commercial, private foundation, 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. Uport relationships that we	ether you have financial relationships (regardless of ar se one line for each entity; add as many lines as you ne re present during the 36 months prior to publicatio	ed by
Are there any rele	vant commets of intere	ist:		
Section 4.				
Section 4.	Intellectual Proper	ty Patents & Copyri	ghts	
Do you have any p	patents, whether plani	ned, pending or issued, b	roadly relevant to the work? Yes Vo	

Scillia 2



Section 5. Relationships not covered 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. Scillia has nothing to disclose.

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lssa 1



Section 1. Identifying Inform	mation	
1. Given Name (First Name) Kimona	2. Surname (Last Name) Issa	3. Date 20-April-2015
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Michael Mont
5. Manuscript Title Bariatric Orthopaedics: Total Hip Arthr	oplasty in the Super-obese	patients (BMI >50 kg/m2)
6. Manuscript Identifying Number (if you k	now it)	
Section 2. The Work Under C	Consideration for Public	cation
	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for at a monitoring board, study design, manuscript preparation,
Section 3. Relevant financial	activities outside the s	submitted work.
of compensation) with entities as desc	ribed in the instructions. Use 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 re present during the 36 months prior to publication.
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Do you have any patents, whether plan	nned, pending or issued, br	roadly relevant to the work? Yes V No

lssa 2



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Identifying Information

Section 1.

ICMJE Form for Disclosure of Potential Conflicts of Interest

Given Name (First Name) Michael	2. Surname (Last Na Mont	ame)		3. Date 20-April-2015	
4. Are you the corresponding author?	✓ Yes No				
5. Manuscript Title Bariatric Orthopaedics: Total Hip Arthro	plasty in the Super-	obese patients (BN	/II >50 kg/i	m2)	
6. Manuscript Identifying Number (if you kn	now it)				
Section 2. The Work Under Co	onsideration for I	Publication			
Did you or your institution at any time recei any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to gra				etc.) for
Section 3. Relevant financial	activities outside	the submitted	work.		
Place a check in the appropriate boxes i of compensation) with entities as descri clicking the "Add +" box. You should rep	bed in the instruction	ons. Use one line fo	or each en	tity; add as many lines as you ne	ed by
Are there any relevant conflicts of interes		No			
If yes, please fill out the appropriate info	ormation below.				
Name of Entity	Grant? Persona	Non-Financial Support?	Other?	Comments	
Stryker	✓				
Wright Medical Technology, Inc.	✓				
DJ Orthopaedics	✓				
Medical Compression Systems					
Medtronic					
Sage Products, Inc.	✓				
TissueGene	V				
National Institutes of Health (NIAMS&NICHD)	/				



Section 4.	Intellectual Property Patents & Copyrights
Do you have any	patents, whether planned, pending or issued, broadly relevant to the work? Yes Volume No
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
Journal of Bone	nedic publications editorial/governing board: American Journal of Orthopedics, Journal of Arthroplasty, and Joint Surgery (American), Journal of Knee Surgery, Orthopedics, Surgical Techniques International. committee appointments for a society: AAOS
	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.
Section 6.	Disclosure Statement
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editorial/governing board: American Journal of Orthopedics, Journal of Arthroplasty, Journal of Bone and Joint Surgery (American), Journal of Knee Surgery, Orthopedics, Surgical Techniques International.

Board member/committee appointments for a society: AAOS.

Dr. Mont reports grants and personal fees from Stryker, grants and personal fees from Wright Medical Technology, Inc., grants and personal fees from DJ Orthopaedics, personal fees from Medical Compression Systems, personal fees from Medtronic, grants and personal fees from Sage Products, Inc., grants and personal fees from TissueGene, grants from National Institutes of Health (NIAMS&NICHD), outside the submitted work; and Medical/Orthopaedic publications



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Bonutti 1



1. Given Name (First Name) Peter	2. Surname (Last Name) Bonutti	3. Date 20-April-2015
4. Are you the corresponding author?	Yes 🗸 No	Corresponding Author's Name Michael Mont
5. Manuscript Title Bariatric Orthopaedics: Total Hip Arth	nroplasty in the Super-obese	patients (BMI >50 kg/m2)
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Section 3. Relevant financi	al activities outside the	submitted work.
Place a check in the appropriate boxe of compensation) with entities as des	es in the table to indicate whoscribed in the instructions. Use report relationships that we serest?	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.
Place a check in the appropriate boxe of compensation) with entities as desclicking the "Add +" box. You should Are there any relevant conflicts of integral to the conflicts of	es in the table to indicate who scribed in the instructions. Us report relationships that we serest? Yes No nformation below.	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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Bonutti 2



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Dr. Bonutti reports personal fees from Biomet: , personal fees from Joint Active Systems, Inc, personal fees from Stryker, outside the submitted work; .

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Bonutti 3



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 Information	ation			
1. Given Name (First Name) Steven	2. Surname (Last Nam Harwin	e)	3. Date 20-April-2015	
4. Are you the corresponding author?	Yes ✓ No	Correspondin Michael Mor	g Author's Name nt	
5. Manuscript Title Bariatric Orthopaedics: Total Hip Arthrop	plasty in the Super-ob	ese patients (BMI :	>50 kg/m2)	
6. Manuscript Identifying Number (if you kno	ow it)			
Section 2. The Work Under Co	nsideration for Pu	blication		
any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of interes	but not limited to grant		overnment, commercial, private foundation, et oard, study design, manuscript preparation,	ic.) for
Section 3. Relevant financial a	activities outside t	he submitted wo	ork.	
of compensation) with entities as describ	oed in the instruction ort relationships that st? Yes N	s. Use one line for ϵ	e financial relationships (regardless of amo each entity; add as many lines as you need ing the 36 months prior to publication.	d by
Name of Entity	Grant? Personal Fees?	Non-Financial Support?	other? Comments	
SLACK Incorporated			Publishing royalties, financial or material support	
Stryker			IP royalties; Stock or stock Options	
Stryker, Convatec			Paid consultant; Paid presenter or speaker	
Journal of Arthroplasty, Orthopedics, Journal of Knee Surgery, Surgical Technology Internationa			Editorial or governing board	
Thieme, Inc., Journal of Knee Surgery			Publishing royalties, financial or material support	

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Section 4. Intellectual Property Patents & Copyrights
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Volume No
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
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Harwin reports personal fees from SLACK Incorporated, personal fees from Stryker, personal fees from Stryker, Convatec, from Journal of Arthroplasty, Orthopedics, Journal of Knee Surgery, Surgical Technology Internationa, from Thieme, Inc., Journal of Knee Surgery, outside the submitted work; .

Evaluation and Feedback

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

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