

ICMJE Form for Disclosure of Potential Conflicts of Interest

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.

1. Identifying information.

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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)

Nadia

2. Surname (Last Name)

Boukhelifa

3. Date

29-September-2014

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

5. Manuscript Title

Comparison of three-dimensional preoperative planning assisted and conventional acetabular cup positioning in total hip arthroplasty: a randomized controlled trial

6. Manuscript Identifying Number (if you know it)

JBJS-D-14-00753R1

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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Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?

☐ Yes

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Section 6. Disclosure Statement

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Dr. Boukhelifa 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) Hugues	2. Surname (Last Name) Pascal Moussellard	3. Date 29-September-2014
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Corresponding Author's Name _____		
5. Manuscript Title Comparison of three-dimensional preoperative planning assisted and conventional acetabular cup positioning in total hip arthroplasty: a randomized controlled trial		
6. Manuscript Identifying Number (if you know it) JBJS-D-14-00753R1		

Section 2. The Work Under Consideration for Publication

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

Section 3. Relevant financial activities outside the submitted work.

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

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
LDR	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☐ Yes ☒ No

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Dr. Pascal Moussellard reports personal fees from LDR, outside the submitted work; .

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1. Given Name (First Name)

ELHADJI

2. Surname (Last Name)

SARI-ALI

3. Date

29-September-2014

4. Are you the corresponding author?

☒ Yes ☐ No

5. Manuscript Title

Comparison of three-dimensional preoperative planning assisted and conventional acetabular cup positioning in total hip arthroplasty: a randomized controlled trial

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If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
SYMBIOS SA	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Royalties

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Dr. SARI-ALI reports personal fees from SYMBIOS SA, outside the submitted work; .

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1. Given Name (First Name)
Yves

2. Surname (Last Name)
Catonne

3. Date
29-September-2014

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
SARIALI

5. Manuscript Title
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Dr. Catonne has nothing to disclose.

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