

#### **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.

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earning royalties or not **Royalties:** Funds are coming in to you or your institution due to your

patent

Lebaschi 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fire	st Name)	2. Surname (Last Name) Lebaschi	3. Date 30-August-2015
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Scott Rodeo, MD.
5. Manuscript Title What's New in Or	thopaedic Research20	15	
6. Manuscript Iden	tifying Number (if you kn	now it)	
			_
Section 2.	The Work Under Co	onsideration for Publi	ication
any aspect of the su statistical analysis, e	ıbmitted work (including	but not limited to grants, d	n 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	he appropriate boxes i with entities as descri	n the table to indicate wh bed in the instructions. U port relationships that we	nether you have financial relationships (regardless of amount lse one line for each entity; add as many lines as you need by ere <b>present during the 36 months prior to publication</b> .
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

Lebaschi 2



Section 5. Relationships not covered above
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Yes, the following relationships/conditions/circumstances are present (explain below):
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Section 6. Disclosure Statement
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Dr. Lebaschi has nothing to disclose.

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Lebaschi 3



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Lane 1



Section 1. Identifying Information							
1. Given Name (Fii Joe	rst Name)	2. Surnam Lane	e (Last Nam	e)		3. Date 30-August-2015	
4. Are you the cor	orresponding author? Yes No Corresponding Author's Name Scott Rodeo						
5. Manuscript Title What's New in O	e rthopaedic Research20	15					
6. Manuscript Ider	ntifying Number (if you kr	now it)					
Section 2.	The Work Under Co	onsiderati	on for Pu	blication			
any aspect of the s statistical analysis, Are there any rel	ubmitted work (including	but not limit	ted to grant	s, data monitoring		t, commercial, private foundation, on the state of the st	etc.) for
Section 3.	Relevant financial	activities	outside t	he 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 <b>present during the 36 months prior to publication</b> .  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	
Graftys			<b>√</b>		Sc	cientific Advisory Board	
Kuros			<b>✓</b>		Sc	cientific Advisory Board	
ISTO			<b>✓</b>		Co	onsultant	
Bone Therapeutics			<b>✓</b>		Sc	cientific Advisory Board	
CollPlant			<b>✓</b>		Co	onsultant	
Royal Pain, MD			<b>✓</b>			onsultant	

Lane 2



Section 4. Intellectual Property Patents & Copyrights
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Volume
Section 5. Relationships not covered above
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Dr. Lane reports personal fees from Graftys, personal fees from Kuros, personal fees from ISTO, personal fees from Bone Therapeutics, personal fees from CollPlant, personal fees from Royal Pain, MD, outside the submitted work; .

### **Evaluation and Feedback**

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Maher 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi Suzanne	, ,	2. Surname (Last Name) Maher	3. Date 03-September-2015	
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Dr. Scott Rodeo	
5. Manuscript Title What's New in O	e rthopaedic Research20	015		
6. Manuscript Ide	ntifying Number (if you kr	now it)		
Section 2.	The Work Under C	onsideration for Public	cation	
Did you or your institution <b>at any time</b> 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				
Section 3.	Relevant financial	activities outside the s	submitted work.	
of compensation clicking the "Add	the appropriate boxes in with entities as descr	in the table to indicate who ibed in the instructions. Us 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 se present during the 36 months prior to publication.	
Section 4.	Intellectual Prope	rty Patents & Copyric	yhts	
Do you have any			oadly relevant to the work? Yes V No	

Maher 2



Section 5.	
Section 5.	Relationships not covered above
	relationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
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Cunningham 1



Section 1.	dentifying Informa	ation		
1. Given Name (First I Matthew	Name)	2. Surname (Last Na Cunningham	me) 3. Date 30-August-2015	
4. Are you the corresp	Are you the corresponding author? Yes V		Corresponding Author's Name	
5. Manuscript Title What's New in Orthopaedic Research2015				
6. Manuscript Identify	ying Number (if you kno	ow it)		
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Section 4.	ntellectual Propert	y Patents & Co	pyrights	
Do you have any pa	itents, whether plann	ed, pending or issu	ed, broadly relevant to the work? Yes V No	

Cunningham 2



Section 5. Polationships not severed above
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Dr. Cunningham has nothing to disclose.

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Zong 1



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1. Given Name (Fi Jianchun	rst Name)	2. Surname (Last Name) Zong	3. Date 03-September-2015				
4. Are you the cor	responding author?	Yes 🗸 No	Corresponding Author's Name Scott A. Rodeo				
5. Manuscript Title What's New in O	e rthopaedic Research20	015					
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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

Khilnani 1



Section 1.	Identifying Inform	ation					
1. Given Name (Firs Tyler	st Name)	2. Surname (Last Name) Khilnani	3. Date 30-August-2015				
4. Are you the corre	Are you the corresponding author?		Corresponding Author's Name Scott Rodeo				
5. Manuscript Title What's New in Ort	thopaedic Research20	15					
6. Manuscript Ident	tifying Number (if you kn	ow it)					
			_				
Section 2.	Section 2. The Work Under Consideration for Publication						
any aspect of the su statistical analysis, e	bmitted 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 s	submitted work.				
of compensation) clicking the "Add	with entities as descri	bed in the instructions. Use port relationships that we	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re <b>present during the 36 months prior to publication</b> .				
Section 4.	Intellectual Proper	ty Patents & Copyri	ghts				
Do you have any բ	patents, whether plani	ned, pending or issued, b	roadly relevant to the work? Yes V No				

Khilnani 2



Section 5. Relationships not sovered 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
Disclosure Statement
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Tyler Khilnani has nothing to disclose.

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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".

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Carballo 1



Section 1.	dentifying Information	on				
Given Name (First Name)  Camila		Surname (Last Name) arballo	3. Date 11-September-2015			
4. Are you the corresponding author?		Yes 🗸 No	Corresponding Author's Name Scott A Rodeo			
5. Manuscript Title What's New in Orthopaedic Research 20						
6. Manuscript Identifying Number (if you know it) JBJS-D-15-00958						
Section 2. The Work Under Consideration for Publication						
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Section 3. Re	elevant financial acti	ivities outside the s	ubmitted 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 <b>present during the 36 months prior to publication</b> .  Are there any relevant conflicts of interest? Yes Vo						
Section 4.	tellectual Property -	Patents & Copyrig	jhts			
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo						

Carballo 2



Section 5. Relationships not sovered above					
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Carballo 3



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Rodeo 1



Section 1. Identifying Inform	ation						
Given Name (First Name)  Scott	2. Surname (Last Name) Rodeo			3. Date 30-August-2015			
4. Are you the corresponding author?	✓ Yes No						
5. Manuscript Title What's New in Orthopaedic Research20	15						
6. Manuscript Identifying Number (if you kn	ow it)						
Section 2. The Work Under Consideration for Publication							
Did you or your institution <b>at any time</b> 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  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.							
Name of Institution/Company	Grant? Personal Fees?	Non-Financial Support?	Other?	Comments			
Stipend from JBJS for manuscript preparation.				Stipend from JBJS for manuscript preparation.			
	J						
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 ort relationships the	ons. Use one line fo	or each en	ntity; add as many lines as you need by			
Are there any relevant conflicts of intere		No					
If yes, please fill out the appropriate info	rmation below.						
Name of Entity	Grant? Personal Fees?	Non-Financial Support?	Other?	Comments			
Rotation Medical			<b>✓</b>	Stock			
Cayenne Medical			<b>✓</b>	Stock			

Rodeo 2



Section 4. Intellectual Property Patents & Copyrights					
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo					
Section 5. Relationships not covered above					
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Dr. Rodeo reports other from Rotation Medical, other from Cayenne Medical, outside the submitted work; .					

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