

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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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



Given Name (First Name) Canadian Orthopaedic Trauma Societ		ne (Last Name) ghton, Presiden	t		3. Date 15-September-2014	
4. Are you the corresponding author?	Yes	✓ No	•	Corresponding Author's Name Rudy Reindl		
5. Manuscript Title Intramedullary versus Extramedullary trial.	fixation for	unstable intertr	ochanteric fi	ractures: /	A prospective randomized control	
6. Manuscript Identifying Number (if you l	know it)					
Section 2. The Work Under (Considerat	tion for Publi	cation			
Did you or your institution at any time rec	oivo navmon	t or sorvices from	a third party	(aoyornm)	ont commercial private foundation et	
ny aspect of the submitted work (includir						
tatistical analysis, etc.)?	_	_	•		, , , , , , , , , , , , , , , , , , , ,	
Are there any relevant conflicts of inte	erest?	Yes No				
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Excess rows can be removed by pressi	Grant?	Personal No	n-Financial	Other?	Comments	
Name of Institution/Company		Personal No	-	Other?		
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Name of Institution/Company		Personal No	-		Comments Participating sites received	
Name of Institution/Company	Grant?	Personal No	-		Comments Participating sites received payments, paid per participant enrolled, via McGill University. Grant paid by COTS to McGill	
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Gill University Anadian Orthopaedic Trauma Society Section 3. Relevant financia	Grant?	Personal Fees? S	submitted ether you ha	work.	Comments Participating sites received payments, paid per participant enrolled, via McGill University. Grant paid by COTS to McGill University in support of this study	
Section 3. Relevant financial Place a check in the appropriate boxes of compensation) with entities as described.	Grant?	Personal Fees? Soutside the set to indicate when instructions. Use	submitted ether you hase one line for	work. ave finance or each er	Participating sites received payments, paid per participant enrolled, via McGill University. Grant paid by COTS to McGill University in support of this study	
Name of Institution/Company cGill University anadian Orthopaedic Trauma Society	Grant?	Personal Fees? S soutside the set o indicate when instructions. Use the south of the set of the se	submitted ether you hase one line for	work. ave finance or each er	Participating sites received payments, paid per participant enrolled, via McGill University. Grant paid by COTS to McGill University in support of this study	



Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments	
Depuy Synthes				✓	The Canadian Orthopaedic Trauma Society has received financial support from Depuy Synthes for education	
Section 4. Intellectual Property Patents & Copyrights						
Do you have any patents, whether plann	ed, pend	ing or issue	ed, broadly releva	nt to the	work? Yes 🗸 No	
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Section 6. Disclosure Statemen						
Disclosure Stateme	nt					
Based on the above disclosures, this form below.	n will auto	omatically (generate a disclos	sure state	ment, which will appear in the box	
Dr. Ross Leighton, President reports other during the conduct of the study; other fr						



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Rahme 1



Section 1.	Identifying Inform	ation		
1. Given Name (Fir Elham	st Name)	2. Surname (Last Name) Rahme	3. Da 11-S	ate eptember-2014
4. Are you the corr	esponding author?	Yes ✓ No	Corresponding Author's Name Rudolf Reindl	
5. Manuscript Title Intramedullary ve		xation for unstable intertr	ochanteric fractures: A prospecti	ve randomized control trial
6. Manuscript Iden	ntifying Number (if you kr	now it)		
			-	
Section 2.	The Work Under Co	onsideration for Public	ation	
any aspect of the su statistical analysis, o	ubmitted work (including	but not limited to grants, da	a third party (government, commer ta monitoring board, study design, r	
Section 3.	Relevant financial	activities outside the s	ubmitted work.	
of compensation clicking the "Add) with entities as descri	bed in the instructions. Us port relationships that wer	ether you have financial relations e one line for each entity; add as e present during the 36 month	many lines as you need by
Section 4.	Intellectual Proper	ty Patents & Copyric	hts	
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work?	Yes ✓ No

Rahme 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):
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Nothing to disclose

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Rahme 3



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

Harvey 1



Section 1.	Identifying Inform	ation			
1. Given Name (F Edward	irst Name)	2. Surname (Last Nam Harvey	ne)		3. Date 17-September-2014
4. Are you the co	rresponding author?	☐ Yes ✓ No	Correspond Rudy Rein	ling Author's Na	ame
5. Manuscript Titl Intramedullary v trial.		xation for unstable in	tertrochanteric fr	actures: A pro	ospective randomized control
6. Manuscript Ide	entifying Number (if you kn	now it)			
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Section 2.	The Work Under Co	onsideration for Pu	ublication		
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Name of Institu	tion/Company	Grant? Personal Fees?	Non-Financial Support?	Other? Co	mments
Orthopaedic Trauma	a Association	✓			
Section 3.	Relevant financial	activities outside t	he submitted	work.	
of compensation	n) with entities as descri	bed in the instruction	is. Use one line fo	r each entity;	elationships (regardless of amount add as many lines as you need by months prior to publication.
	levant conflicts of intere		No		
If yes, please fill	out the appropriate info	ormation below.			
Name of Entity		Grant? Personal Fees?	Non-Financial Support?	Other? Co	mments
Synthes Canada				✓ salar	ry support for research assistant

Harvey 2



Section 4. Intellectual Property Patents & Copyrights						
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Volume						
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Dr. Harvey reports grants from Orthopaedic Trauma Association, during the conduct of the study; other from Synthes Canada, outside the submitted work						

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

Berry 1



Section 1.	Identifying Inform	ation			
1. Given Name (Fi Gregory	irst Name)	2. Surname (Last Nam Berry	e)		3. Date 09-September-2014
4. Are you the cor	rresponding author?	☐ Yes ✓ No	Correspondi Rudy Reind	ng Author's Na I	ime
5. Manuscript Titl Intramedullary v trial.		xation for unstable int	ertrochanteric fra	ctures: A pros	spective randomized control
6. Manuscript Ide	ntifying Number (if you kn	now it)			
Section 2.	The Work Under Co	onsideration for Pu	ıblication		
any aspect of the s statistical analysis,	submitted work (including	but not limited to grant			ommercial, private foundation, etc.) for esign, manuscript preparation,
•				one entity pre	ess the "ADD" button to add a row.
	be removed by pressing			, ,	
Name of Institut	tion/Company	Grant? Personal Fees?	Non-Financial Support?	Other? Co	mments
Orthopaedic Trauma	Association	✓			
Section 3.	Relevant financial	activities outside t	he submitted w	ork.	
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	levant conflicts of intere		lo		
If yes, please fill	out the appropriate info	ormation below.			
Name of Entity		Grant? Personal Fees?	Non-Financial Support?	Other? Co	mments
Synthes Canada				✓ salary	support for research assistant

Berry 2



Section 4. Intellectual Property Patents & Copyrights						
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Reindl 1



Carlina					
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Given Name (First Name) Rudolf	2. Surname (Last Name) Reindl	3. Date 08-September-2014			
4. Are you the corresponding author?	✓ Yes No				
5. Manuscript Title Intramedullary versus extramedullary	fixation for unstable intertrochante	ric fractures: A prospective randomized control trial			
6. Manuscript Identifying Number (if you k	(now it)				
Section 2. The Work Under C	Consideration for Publication				
	g but not limited to grants, data monit	earty (government, commercial, private foundation, etc.) for oring board, study design, manuscript preparation,			
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 Non-Finan Fees Support	_ Other• Comments			
Orthopedic Trauma Association	✓				
Section 3. Relevant financia	activities outside the submit	ted work.			
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Name of Entity	Grant? Personal Non-Finan Fees? Support	_ Other• Comments			
Synthes DuPuy Canada		Salary support for research assistant			

Reindl 2



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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. Reindl reports grants from Orthopedic Trauma Association, during the conduct of the study; other from Synthes DuPuy Canada, outside the submitted work; .

Evaluation and Feedback

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