

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

5. Relationships not covered above.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Abdulla

2. Surname (Last Name)

Damluji

3. Date

27-January-2015

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Eileen Hennrikus, MD

5. Manuscript Title

Incidence, Timing, Causes and Outcomes of Hyponatremia in Hospitalized Orthopedic Surgery Patients

6. Manuscript Identifying Number (if you know it)

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Dr. Damluji has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Bradley	2. Surname (Last Name) Kinney	3. Date 26-January-2015
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Eileen Hennrikus, MD
5. Manuscript Title Incidence, Timing, Causes and Outcomes of Hyponatremia in Hospitalized Orthopedic Surgery Patients		
6. Manuscript Identifying Number (if you know it) 		

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

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Dr. Kinney has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Charles

2. Surname (Last Name)
Davis III

3. Date
27-January-2015

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Eileen Hennrikus, MD

5. Manuscript Title
Incidence, Timing, Causes and Outcomes of Hyponatremia in Hospitalized Orthopedic Surgery Patients

6. Manuscript Identifying Number (if you know it)

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Dr. Davis III has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Jane

2. Surname (Last Name)

Wieler

3. Date

25-January-2015

4. Are you the corresponding author?

☐ Yes☒ No

Corresponding Author's Name

Eileen Hennrikus, MD

5. Manuscript Title

Incidence, Timing, Causes and Outcomes of Hyponatremia in Hospitalized Orthopedic Surgery Patients

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Dr. Wieler has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Erik	2. Surname (Last Name) Lehman	3. Date 25-January-2015
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Eileen Hennrikus, MD
5. Manuscript Title Incidence, Timing, Causes and Outcomes of Hyponatremia in Hospitalized Orthopedic Surgery Patients		
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Dr. Lehman has nothing to disclose.

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1. Given Name (First Name)
George

2. Surname (Last Name)
Ou

3. Date
26-January-2015

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name
Eileen Hennrikus, MD

5. Manuscript Title
Incidence, Timing, Causes and Outcomes of Hyponatremia in Hospitalized Orthopedic Surgery Patients

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1. Given Name (First Name)
Robert

2. Surname (Last Name)
Grunfeld

3. Date
25-January-2015

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Eileen Hennrikus, MD

5. Manuscript Title
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2. Surname (Last Name)
Mets

3. Date
27-January-2015

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name
Eileen Hennrikus, MD

5. Manuscript Title
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Eileen

2. Surname (Last Name)
Hennrikus

3. Date
26-January-2015

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