

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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1. Given Name (First Name) Nam Su	2. Surname (Last Name) Cho	3. Date 10-March-2015
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Yong Girl Rhee
5. Manuscript Title Clinical Outcomes of Semiconstrained Total Elbow Arthroplasty in Patients Younger than 40 Years		
6. Manuscript Identifying Number (if you know it) JBJS-D-14-01325		

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Jung Gwan

2. Surname (Last Name)

Park

3. Date

10-March-2015

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☐ Yes

☒ No

Corresponding Author's Name

Yong Girl Rhee

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Yong Girl

2. Surname (Last Name)  
Rhee

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