

#### **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.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

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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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Yin 1



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Bob	2. Surname (Last Name) Yin		3. Date 12-March-2015
4. Are you the corresponding author?	✓ Yes No		
5. Manuscript Title Web-based education prior to knee artl	nroscopy enhances informed co	onsent and patien	t knowledge recall
6. Manuscript Identifying Number (if you kr JBJS-D-14-01174R1	now it)		
Section 2. The Work Under Co	onsideration for Publicatio	n	
Did you or your institution <b>at any time</b> rece any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere If yes, please fill out the appropriate info Excess rows can be removed by pressin	g but not limited to grants, data mo est?  Yes  No ormation below. If you have mo	nitoring board, stud	dy design, manuscript preparation,
Name of Institution/Company	Grant? Personal Non-Fin Fees? Suppo	Other•	Comments
/irtual Medical Inc. (Parent company of the web-based teaching tool)	<b>✓</b>		Provided the IRB application fee and he statistician's fee
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Place a check in the appropriate boxes in of compensation) with entities as described clicking the "Add +" box. You should repart there any relevant conflicts of interest.	ibed in the instructions. Use on port relationships that were <b>pre</b>	e line for each enti	ity; add as many lines as you need by
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intellectual Propel	ty Patents & Copyrights		
Do you have any patents, whether plan	ned, pending or issued, broadly	relevant to the w	vork? ☐ Yes 🗸 No

Yin 2



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Section 5.	Relationships not covered above			
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Yes, the follo	wing relationships/conditions/circumstances are present (explain below):			
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest			
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements rnals may ask authors to disclose further information about reported relationships.			
Section 6.				
Section 6.	Disclosure Statement			
Based on the abo	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box			
Dr. Yin reports g the study; .	rants from Virtual Medical Inc. (Parent company of the web-based teaching tool), during the conduct of			

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Gambardella 1



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4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Bob Yin MD		
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Goldsmith 1



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