

#### **Instructions**

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Hube 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi Robert	rst Name)	2. Surname (Last Name) Hube		3. Date 27-November-2013
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Nar	me
5. Manuscript Title Current failure m		total knee arthroplasty		
6. Manuscript lder	ntifying Number (if you kr	now it)		
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Section 2.	The Work Under Co	onsideration for Public	cation	
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Section 3.	Relevant financial	activities outside the s	submitted work.	
of compensation clicking the "Add	) with entities as descri	ibed in the instructions. Us port relationships that wer	se one line for each entity; a	ationships (regardless of amount dd as many lines as you need by nonths prior to publication.
Section 4.	Intellectual Prope	rty Patents & Copyric	ghts	
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work?	☐ Yes 🗸 No

Hube 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?
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	ationships/conditions/circumstances that present a potential conflict of interest
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements Irnals may ask authors to disclose further information about reported relationships.
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Matziolis 1



Section 1.	lentifying Informa	ation		
Given Name (First N Georg	lame)	2. Surname (Last Name) Matziolis		. Date 7-November-2013
4. Are you the corresp	4. Are you the corresponding author? Yes Vo		Corresponding Author's Name Dr. Kathi Thiele	2
5. Manuscript Title Current failure mech	nanisms in knee arthi	roplasty		
6. Manuscript Identify	ing Number (if you kno	ow it)		
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Section 2. Th	ne Work Under Co	nsideration for Publ	ication	
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Matziolis 2



Section 5. Relationships not severed 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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Section 6. Disclosure Statement	
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Dr. Matziolis has nothing to disclose.	

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Section 1.	Identifying Inforr	nation				
1. Given Name (Fi Carsten	rst Name)	2. Surname Perka	e (Last Nam	e)		3. Date 27-November-2013
4. Are you the cor	responding author?	Yes	<b>√</b> No	Correspond Kathi Thie		r's Name
5. Manuscript Title Current failure m	e nechanisms of knee art	hroplasty				
6. Manuscript Idei	ntifying Number (if you k	now it)				
Section 2.	The Work Under C	onsideratio	on for Pu	blication		
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Excess rows can	be removed by pressir	ng the "X" bu				
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Endostiftung Hambu	rg	<b>✓</b>				
AESCULAP AG		<b>✓</b>				
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Section 3.	Relevant financial	activities o	outside tl	he submitted	work.	
of compensation	n) with entities as descr	ribed in the ir	nstruction	s. Use one line fo	or each en	ial relationships (regardless of amount tity; add as many lines as you need by 36 months prior to publication.
Are there any rel	evant conflicts of inter	est? ✓ Ye	es N	lo		
If yes, please fill o	out the appropriate inf	ormation be	low.			
Name of Entity		Grant? F	Personal Fees	Non-Financial Support?	Other?	Comments
DePuy			<b>√</b>			
Zimmer			<b>√</b>			



Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments	
AESCULAP	<b>✓</b>	<b>✓</b>				
Smith&Nephew		$\checkmark$				
Section 4. Intellectual Propert	y Pate	ents & Co <sub>l</sub>	pyrights			
Do you have any patents, whether plann	ed, pend	ing or issue	ed, broadly releva	ant to the v	work? Yes 🗸 No	
Section 5. Relationships not c	overed	above				
Are there other relationships or activities potentially influencing, what you wrote i				influenced	d, or that give the appearance	of
Yes, the following relationships/cond			•			
▼ No other relationships/conditions/cir	Cumstan	ces that pre	esent a potential	COIIIICE OI	interest	
At the time of manuscript acceptance, jo On occasion, journals may ask authors to						atements.
Section 6. Disclosure Stateme	nt					
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Based on the above disclosures, this form below.	i will auto	omatically	generate a discio	sure state	ment, which will appear in the	: DOX
Dr. Perka reports grants from Endostiftur fees from DePuy, personal fees from Zim outside the submitted work; .	_	0.0			, .	



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Sostheim 1



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1. Given Name (Fir Michael	rst Name)	2. Surname (Last Name) Sostheim		3. Date 27-November-2013
4. Are you the corr	responding author?	Yes ✓ No	Corresponding Author's Name	e
5. Manuscript Title Current failure m		total knee arthroplasty		
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any aspect of the s statistical analysis,	ubmitted work (including	g but not limited to grants, da	a third party (government, comr ta monitoring board, study desig	mercial, private foundation, etc.) for gn, manuscript preparation,
Section 3.	Delevent financial	activities outside the s	u la maiste a di u a ula	
Place a check in t of compensation clicking the "Add	he appropriate boxes i ) with entities as descri	in the table to indicate who ibed in the instructions. Us port relationships that wer	ether you have financial relati	ionships (regardless of amount d as many lines as you need by onths prior to publication.
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Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work?	Yes Vo

Sostheim 2



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Thiele 1



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4. Are you the cor	responding author?	✓ Yes	No			
5. Manuscript Title Current failure m	e nechanisms in primary t	otal knee arthrop	olasty			
6. Manuscript Ider	ntifying Number (if you kr	ow it)				
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any aspect of the s statistical analysis,	stitution <b>at any time</b> recei submitted work (including	ive payment or serve but not limited to	vices from a third party (go			
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Do you have any	patents, whether plan	ned, pending or i	ssued, broadly relevant	t to the work?	Yes _✓	No

Thiele 2



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Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

## 4. Intellectual Property.

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

## Relationships not covered above.

Use this section to report 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.

#### Definitions.

**Entity:** government agency, foundation, commercial sponsor, academic institution, etc.

**Grant:** A grant from an entity, generally [but not always] paid to your organization

**Personal Fees:** Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

**Non-Financial Support:** Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

Other: Anything not covered under the previous three boxes

**Pending:** The patent has been filed but not issued

**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

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Section 1.	Identifying Inform	nation	
1. Given Name (Fi Hermann Otto	rst Name)	2. Surname (Last Name) Mayr	3. Date 27-November-2013
4. Are you the cor	responding author?	☐ Yes ✓ No	Corresponding Author's Name Kathi Thiele
5. Manuscript Title Current failure n	e nechanisms in knee artl	hroplasty	
6. Manuscript Ide	ntifying Number (if you kr	now it)	
			_
Section 2.	The Work Under Co	onsideration for Public	cation
any aspect of the s statistical analysis,	ubmitted work (including	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,
Section 3.	Relevant financial	activities outside the s	submitted work.
of compensation clicking the "Add	n) with entities as descri	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 re present during the 36 months prior to publication.
Section 4.	Intellectual Prope	rty Patents & Copyrig	ghts
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No

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Section 5. Polotionships 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 statement 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. Mayr has nothing to disclose.

### **Evaluation and Feedback**

Please visit <a href="http://www.icmje.org/cgi-bin/feedback">http://www.icmje.org/cgi-bin/feedback</a> to provide feedback on your experience with completing this form.

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