

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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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

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

Amendola 1



Section 1.	Identifying Information							
1. Given Name (Fi Annunziato	ven Name (First Name) 2. Surname (Last Name) unziato Amendola				Date -May-2014			
4. Are you the corresponding author?		Yes ✓ No	Yes No Corresponding Author's Na Robert H. Brophy, MD					
5. Manuscript Title Diabetes and Graft Choice are Risk Factors for Infection Following Anterior Cruciate Ligament Reconstruction								
6. Manuscript Idei	ntifying Number (if you l	know it)						
Section 2.	The Week Heder	Consideration for I	Dublication					
	•			<i>(</i>				
any aspect of the s	submitted work (includin				ercial, private foundation, etc.) f , manuscript preparation,			
statistical analysis, etc.)? Are there any relevant conflicts of interest? Yes No								
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Section 3. Relevant financial activities outside the submitted work.								
of compensation clicking the "Ado Are there any rel	the appropriate boxes n) with entities as desc	s in the table to indicative in the table to indicative in the instruction in the port relationships the rest?	ite whether you h	ave financial relatio or each entity; add	nships (regardless of amoun as many lines as you need by ths prior to publication.			
Name of Entity		Grant? Persona Fees?	Non-Financial Support?	Other? Commo	ents			
Arthrex, Inc.								
National Institutes of	Health	✓						
AO Trauma North Am	nerica	✓						
Arthrosurface, Inc.								
MTP Solutions								

Amendola 2



Section 4. Intellectual Property Patents & Copyrights					
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Volume No					
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Dr. Amendola reports personal fees from Arthrex, Inc., grants from National Institutes of Health, grants from AO Trauma North America, personal fees from Arthrosurface, Inc., personal fees from MTP Solutions, outside the submitted work; .					

Evaluation and Feedback

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Amendola 3



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Andrish 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fii Jack	rst Name)	2. Surname (Last Name) Andrish	3. Date 09-June-2014
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Robert H. Brophy, MD
5. Manuscript Title Diabetes and Gra		ors for Infection Following	Anterior Cruciate Ligament Reconstruction
6. Manuscript Ider	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	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
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	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 Proper	rty Patents & Copyric	ghts
Do you have any	patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No

Andrish 2



Section 5. Relationships not severed above
Relationships not covered above
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Dr. Andrish has nothing to disclose.

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ert testimony, employment, or other affiliations patent

n-Financial Support: Examples include drugs/equipment

Brophy 1



Section 1. Identifying Inform	nation			
1. Given Name (First Name) Robert	ne) 2. Surname (Last Name) 3. Date Brophy 10-June-2014			
4. Are you the corresponding author?	✓ Yes No			
5. Manuscript Title Diabetes and Graft Choice are Risk Fact	ors for Infection Following Anterior Cruciate Ligame	nt Reconstruction		
6. Manuscript Identifying Number (if you kr	now it)			
Section 2. The Work Under C	onsideration for Publication			
Did you or your institution at any time rece any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	ive payment or services from a third party (government, co g but not limited to grants, data monitoring board, study d			
Section 3. Relevant financial	activities outside the submitted work.			
of compensation) with entities as descr	in the table to indicate whether you have financial re ibed in the instructions. Use one line for each entity; port relationships that were present during the 36 r est? Yes V	add as many lines as you need by		
Section 4. Intellectual Proper	rty Patents & Copyrights			
Do you have any patents, whether plan	ned, pending or issued, broadly relevant to the work	? Yes ✓ No		

Brophy 2



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

1

Dunn



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Section 1.	Identifying Inforr	nation				
1. Given Name (Fi	rst Name)	2. Surname (l Dunn	Last Name)			3. Date 30-May-2014
4. Are you the corresponding author?		Yes	✓ No	Correspond Robert H. I	_	
5. Manuscript Title Diabetes and Gra		tors for Infectio	n Following	g Anterior Cru	uciate Lig	ament Reconstruction
6. Manuscript Ider	ntifying Number (if you k	now it)				
Section 2.	The Work Under C	onsideration	n for Publi	cation		
	ubmitted work (includin				-	ent, commercial, private foundation, etc.) for udy design, manuscript preparation,
=	evant conflicts of inter	est? ✓ Yes	No			
	out the appropriate inf be removed by pressir		•	ve more than	one enti	ty press the "ADD" button to add a row.
Name of Institut	, ,	Grant? Pe	rsonal No	n-Financial Support	Other?	Comments
National Institutes of	Health (NIH/NIAMS)	√				R01 AR053684 (Spindler; PI)
National Institutes of	Health (NIH/NIAMS)	✓				K23 AR052392 (Dunn; PI)
	ı					
Section 3.	Relevant financia	activities ou	tside the	submitted	work.	
of compensation	n) with entities as desc	ribed in the ins	tructions. U	se one line fo	r each er	rial relationships (regardless of amount ntity; add as many lines as you need by 26 months prior to publication.
	evant conflicts of inter		No			
If yes, please fill o	out the appropriate inf	ormation belov	<i>N</i> .			
Name of Entity		Grant•	_	n-Financial Support	Other?	Comments
Smith and Nephew E	ndoscopy				✓	Unrestricted Educational Gift
Donjoy Orthopaedics					✓	Unrestricted Educational Gift

Dunn 2



Section 4. Intellectual Property Patents & Copyrights
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Volume
Section 5. Relationships not covered above
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Dr. Dunn reports grants from National Institutes of Health (NIH/NIAMS), grants from National Institutes of Health (NIH/NIAMS), during the conduct of the study; other from Smith and Nephew Endoscopy, other from Donjoy Orthopaedics, outside the submitted work; .

Evaluation and Feedback

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Huston 1



	ı				
Section 1.	Identifying Inforr	mation			
1. Given Name (Fi	rst Name)	2. Surname (Last Huston	Name)		3. Date 28-May-2014
4. Are you the cor	responding author?	Yes ✓ N	No Correspond Robert H.		
5. Manuscript Title Diabetes and Gra		tors for Infection F	ollowing Anterior Cr	uciate Lig	gament Reconstruction
6. Manuscript Ider	ntifying Number (if you k	(now it)			
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	ubmitted work (includin			-	ent, commercial, private foundation, etc.) for udy design, manuscript preparation,
•	evant conflicts of inte	rest? 🗸 Yes	No		
	out the appropriate info be removed by pressing		f you have more thar	n one enti	ity press the "ADD" button to add a row.
Name of Institut		Grant? Perso		Other?	Comments
National Institutes of	Health (NIH/NIAMS)	√			R01 AR053684 (Spindler; PI)
National Institutes of	Health (NIH/NIAMS)	✓			K23 AR052392 (Dunn; PI)
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If yes, please fill o	out the appropriate in	formation below.			
Name of Entity		Grant? Perso		Other?	Comments
Smith and Nephew E	ndoscopy			✓	Unrestricted Educational Gift
Donjoy Orthopaedics				✓	Unrestricted Educational Gift

Huston 2



Section 4. Intellectual Property - Patents & Conscients
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Relationships not covered above.

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Definitions.

Kaeding

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Other: Anything not covered under the previous three boxes

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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

1

administrative support, etc.



Section 1.	Identifying Inform	nation	
Given Name (Fill Christopher	rst Name)	2. Surname (Last Name) Kaeding	3. Date 31-May-2014
4. Are you the cor	1. Are you the corresponding author?		Corresponding Author's Name Robert H. Brophy, MD
5. Manuscript Title Diabetes and Gra		ors for Infection Following	Anterior Cruciate Ligament Reconstruction
6. Manuscript Ider	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 ita monitoring board, study design, manuscript preparation,
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	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 Proper	rty Patents & Copyrig	ghts
Do you have any			roadly relevant to the work? Yes V No

Kaeding 2



Section 5. 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 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. Kaeding has nothing to disclose.

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.

Kaeding 3



Instructions

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Marx 1



Section 1. Iden	tifying Information		
1. Given Name (First Nam Robert	e) 2. Surna Marx	me (Last Name)	3. Date 28-May-2014
4. Are you the correspond	. Are you the corresponding author?		Corresponding Author's Name Robert H. Brophy, MD
5. Manuscript Title Diabetes and Graft Cho	ice are Risk Factors for Info	ection Following	g Anterior Cruciate Ligament Reconstruction
6. Manuscript Identifying	Number (if you know it)		
Section 2. The V	Work Under Considera	tion for Publi	cation
	ed work (including but not lir		a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Section 3. Relev	vant financial activitie	s outside the	submitted work.
of compensation) with	entities as described in the x. You should report relation	e instructions. U	nether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by tree present during the 36 months prior to publication.
Section 4. Intel	lectual Property Pat	ents & Copyri	ghts
Do you have any patent	ts, whether planned, pend	ling or issued, b	roadly relevant to the work? Yes V No

Marx 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):
No other relationships/conditions/circumstances that present a potential conflict of interest
Royalties from Intellectual Property: Demos Health (The ACL Solution)
Springer ("Revision ACL Reconstruction: Indications and Technique")
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Section 6. Disclosure Statement
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Dr. Marx reports and Royalties from Intellectual Property: Demos Health (The ACL Solution)
Springer ("Revision ACL Reconstruction: Indications and Technique").

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Marx 3



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

expert testimony, employment, or other affiliations patent

Non-Financial Support: Examples include drugs/equipment

McCarty 1



Section 1. Identifying Info	rmation		
1. Given Name (First Name) Eric	Surname (Last Name) McCarty		3. Date 10-June-2014
4. Are you the corresponding author?	Yes 🗸 No	Corresponding Author's Nobert Brophy, MD	Name
5. Manuscript Title Diabetes and Graft Choice are Risk Fa	actors for Infection Following	g Anterior Cruciate Ligam	ent Reconstruction
6. Manuscript Identifying Number (if you	know it)		
		_	
Section 2. The Work Under	Consideration for Publi	cation	
Did you or your institution at any time re any aspect of the submitted work (includ statistical analysis, etc.)? Are there any relevant conflicts of int	ing but not limited to grants, da		
Section 3. Relevant financia	al activities outside the	submitted work.	
Place a check in the appropriate boxe of compensation) with entities as desclicking the "Add +" box. You should Are there any relevant conflicts of int	cribed in the instructions. U report relationships that we	se one line for each entity	r; add as many lines as you need by
If yes, please fill out the appropriate in			
Name of Entity	Grant? Personal Fees? S	n-Financial Other? C	omments
Biomet sports medicine			
Smith & Nephew	✓		
Mitek	✓		
Biomet sports medicine	✓		
Stryker	✓		

McCarty 2



Section 4. Intellectual Property - Patents & Convertebra
Intellectual Property Patents & Copyrights
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Volume
Section 5. 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. McCarty reports personal fees from Biomet sports medicine, grants from Smith & Nephew, grants from Mitek, grants from Biomet sports medicine, grants from Stryker, outside the submitted work; .

Evaluation and Feedback

 $Please\ visit\ \underline{http://www.icmje.org/cgi-bin/feedback}\ to\ provide\ feedback\ on\ your\ experience\ with\ completing\ this\ form.$

McCarty 3



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

Nwosu 1



Section 1. Identifying Inform	ation		
Given Name (First Name) Samuel	2. Surname (Last Name) Nwosu		3. Date 05-June-2014
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author Robert H. Brophy, N	
5. Manuscript Title Diabetes and Graft Choice are Risk Facto	ors for Infection Following	Anterior Cruciate Lig	gament Reconstruction
6. Manuscript Identifying Number (if you kn	ow it)		
		_	
Section 2. The Work Under Co			
The Work Onder Co	onsideration for Public		
any aspect of the submitted work (including statistical analysis, etc.)?	but not limited to grants, da		ent, commercial, private foundation, etc.) for tudy design, manuscript preparation,
Are there any relevant conflicts of intere			
Excess rows can be removed by pressing		e more than one ent	ity press the "ADD" button to add a row.
Name of Institution/Company	Grant•	n-Financial other?	Comments
National Institutes of Health (NIH/NIAMS)	✓		Grant #5R01 AR053684 (Spindler, PI)
National Institutes of Health (NIH/NIAMS)	✓		Grant #5K23 AR052392 (Dunn, PI)
Section 3. Relevant financial a	activities outside the s	ubmitted work.	
Place a check in the appropriate boxes in of compensation) with entities as describling the "Add +" box. You should rep	bed in the instructions. Us	se one line for each e	ntity; add as many lines as you need by
Are there any relevant conflicts of intere			
If yes, please fill out the appropriate info	rmation below.		
Name of Entity	Grant	n-Financial other?	Comments
Smith and Nephew Endoscopy			Unrestricted educational gift
Donjoy Orthopaedics			Unrestricted educational gift

Nwosu 2



Section 4. Intellectual Property Patents & Copyrights					
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo					
Section 5. 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?					
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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. Nwosu reports grants from National Institutes of Health (NIH/NIAMS), grants from National Institutes of Health (NIH/NIAMS), during the conduct of the study; other from Smith and Nephew Endoscopy, other from Donjoy Orthopaedics, outside the submitted work; .					

Evaluation and Feedback

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Nwosu 3



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Parker 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fii Richard	rst Name)	2. Surname (Last Name) Parker	3. Date 28-May-2014
4. Are you the cor	ou the corresponding author? Yes Vo		Corresponding Author's Name Robert H. Brophy, MD
5. Manuscript Title Diabetes and Gra		ors for Infection Followin	g Anterior Cruciate Ligament Reconstruction
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			_
Section 2.	The Work Under C	onsideration for Publ	ication
any aspect of the s statistical analysis,	ubmitted work (including	g but not limited to grants, d	n a third party (government, commercial, private foundation, etc.) for lata monitoring board, study design, manuscript preparation,
Section 3.	Polovant financial	activities outside the	cubmitted work
of compensation clicking the "Add	the appropriate boxes) with entities as descr	in the table to indicate whice the control of the inthe instructions. Uport relationships that we	hether you have financial relationships (regardless of amount Use one line for each entity; add as many lines as you need by ere present during the 36 months prior to publication.
Section 4.	Intellectual Prope	rty Patents & Copyri	ights
Do you have any	patents, whether plan	ned, pending or issued, b	proadly relevant to the work? Yes V No

Parker 2



Section 5.	Deletionaline not exceed 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 follo	wing relationships/conditions/circumstances are present (explain below):					
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Section 6.	Disclosure Statement					
Based on the abo below.	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box					
Dr. Parker has no	othing to disclose.					

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Parker 3



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

Spindler 1



	l					
Section 1.	Identifying Inform	nation				
1. Given Name (Fi Kurt	rst Name)	2. Surname Spindler	(Last Name)			3. Date 06-June-2014
4. Are you the cor	responding author?	Yes	√ No	Correspond		
5. Manuscript Title Diabetes and Gra		tors for Infecti	on Followir	ng Anterior Cru	uciate Lig	ament Reconstruction
6. Manuscript Ider	ntifying Number (if you k	now it)				
	ı					
Section 2.	The Work Under C	onsideratio	n for Publ	lication		
	ubmitted work (includin					ent, commercial, private foundation, etc.) for udy design, manuscript preparation,
-	evant conflicts of inter	est? 🗸 Yes	No			
	out the appropriate inf be removed by pressir		•	ave more than	one enti	ty press the "ADD" button to add a row.
Name of Institut	, ,	Grant? Pe	ersonal No	on-Financial Support	Other?	Comments
National Institutes of	Health (NIH/NIAMS)	√				R01 AR053684 (Spindler; PI)
National Institutes of	Health (NIH/NIAMS)	✓				K23 AR052392 (Dunn; PI)
	ı					
Section 3.	Relevant financial	activities o	utside the	submitted	work.	
of compensation) with entities as desci	ribed in the in	structions. l	Use one line fo	r each er	cial relationships (regardless of amount ntity; add as many lines as you need by 26 months prior to publication.
	evant conflicts of inter					
If yes, please fill o	out the appropriate inf	ormation belo)W.			
Name of Entity		Grant•	_	on-Financial Support	Other?	Comments
Smith and Nephew E	ndoscopy				✓	Unrestricted Educational Gift
Donjoy Orthopaedics					✓	Unrestricted Educational Gift

Spindler 2



Section 4. Intellectual Property Patents & Copyrights					
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Volume					
Section 5. 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 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. Spindler reports grants from National Institutes of Health (NIH/NIAMS), grants from National Institutes of Health (NIH/NIAMS), during the conduct of the study; other from Smith and Nephew Endoscopy, other from Donjoy Orthopaedics, outside the submitted work; .					

Evaluation and Feedback

 $Please\ visit\ \underline{http://www.icmje.org/cgi-bin/feedback}\ to\ provide\ feedback\ on\ your\ experience\ with\ completing\ this\ form.$

Spindler 3



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.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

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.

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

Wolf 1



Section 1. Identi	fying Information			
1. Given Name (First Name) Brian	2. Surname (La Wolf	ast Name)	3. Date 30-May-2014	
4. Are you the correspondir	ng author? Yes		nding Author's Name . Brophy, MD	
5. Manuscript Title Diabetes and Graft Choic	e are Risk Factors for Infectior	n Following Anterior Cr	ruciate Ligament Reconstruction	
6. Manuscript Identifying N	umber (if you know it)			
Section 2. The W	ork Under Consideration	for Publication		
	work (including but not limited		(government, commercial, private foundation, etc.) f g board, study design, manuscript preparation,	or
Are there any relevant co	innets of interest:	V NO		
Section 3. Releva	nt financial activities out	tside the submitted	work.	
Place a check in the approof compensation) with er	opriate boxes in the table to in utities as described in the insti You should report relationshi	ndicate whether you ha ructions. Use one line fo	ave financial relationships (regardless of amoun for each entity; add as many lines as you need by during the 36 months prior to publication.	
•	opropriate information below			
Name of Entity	Grant? Pers	sonal Non-Financial ses? Support?	Other? Comments	
Jnited Health Care			Scientific Advisory Board	
Section 4. Intelle	ctual Property Patents	& Copyrights		
Do you have any patents,	whether planned, pending o	r issued, broadly releva	ant to the work? Yes V No	

Wolf 2



Section 5. 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
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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. Wolf reports other from United Health Care, outside the submitted work; .

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.

Wolf 3



Instructions

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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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Relationships not covered above.

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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

Wright 1



Section 1. Identifying Inform	nation			
identifying inform	lation			
Given Name (First Name) Rick	2. Surname (Last Name) Wright		3. Date 11-December-2014	
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Robert H. Brophy, MD		
5. Manuscript Title Factors Associated with Infection Follow	wing Anterior Cruciate Liga	ament Reconstruction	า	
6. Manuscript Identifying Number (if you kr	now it)			
		_		
Section 2. The Work Under Co	onsideration for Public	cation		
Did you or your institution at any time rece any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, da			
If yes, please fill out the appropriate info Excess rows can be removed by pressin	ormation below. If you hav	re more than one enti	ty press the "ADD" button to add a rov	
Name of Institution/Company	Grant	n-Financial other?	Comments	
National Institutes of Health; National Institute of Arthritis and Musculoskeletal and Skin Diseases			Research Grant	
Section 3. Relevant financial	activities outside the s	submitted work.		
Place a check in the appropriate boxes of compensation) with entities as descr clicking the "Add +" box. You should re	ibed in the instructions. Us	se one line for each er	ntity; add as many lines as you need by	
Are there any relevant conflicts of interes	est? ✓ Yes No			
If yes, please fill out the appropriate information below.				
Name of Entity	Grant•	n-Financial other?	Comments	
Wolters Kluwer Lippincott Williams & Wilkins			Book royalties	

Wright 2



Section 4. Intellectual Property - Patents & Converients				
Intellectual Property Patents & Copyrights				
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Volume				
Section 5. 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?				
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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. Wright reports grants from National Institutes of Health; National Institute of Arthritis and Musculoskeletal and Skin Diseases, during the conduct of the study; personal fees from Wolters Kluwer Lippincott Williams & Wilkins, outside the submitted work; .				

Evaluation and Feedback

 $Please\ visit\ \underline{http://www.icmje.org/cgi-bin/feedback}\ to\ provide\ feedback\ on\ your\ experience\ with\ completing\ this\ form.$

Wright 3