

#### 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.

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| Section 1.   | Identifying Inforn        | nation   |                                     |
|--|---------------------------|--|-------------------------------------|
| 1. Given Name (Fin<br>Truike                                 | rst Name)                 | 2. Surname (Last Name)<br>Thien                    | 3. Date<br>12-January-2014          |
| 4. Are you the cor   | responding author?        | ✓ Yes No   |                                     |
| 5. Manuscript Title<br>Periprosthetic fe<br>Association data | moral fracture within 2   | 2 years after THR. Analysis of 437629 operations i | in the Nordic Arthroplasty Registry |
| 6. Manuscript Ider   | ntifying Number (if you k | now it)  |                                     |

JBJS-D-13-00643R2

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🖌 No

| Are there any relevant conflicts of interest? |  | Yes |
|---|--|-----|
|---|--|-----|

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No

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|---|--|-----|--------------|
|---|--|-----|--------------|

| Do you have any patents, whether planned, pending or issued, broadly relevant to the work? | Yes | $\checkmark$ | No |
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Dr. Thien has nothing to disclose.

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| Section 1.   | Identifying Infor              | mation                             |   |
|--|--------------------------------|------------------------------------|---|
| 1. Given Name (Fi<br>Pekka                                   | rst Name)                      | 2. Surname (Last Name<br>Pulkkinen | ) 3. Date<br>12-January-2014                                |
| 4. Are you the corresponding author?                         |                                | Yes 🖌 No                           | Corresponding Author's Name<br>Truike Thien                 |
| 5. Manuscript Title<br>Periprosthetic fe<br>Association data | moral fracture within          | 2 years after THR. Analys          | is of 437629 operations in the Nordic Arthroplasty Registry |
| 6. Manuscript Iden<br>JBJS-D-13-00643                        | ntifying Number (if you<br>3R2 | know it)                           |   |

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| Section 1.   | Identifying Infor              | mation                             |  |
|--|--------------------------------|------------------------------------|--|
| 1. Given Name (Fi<br>Alma B.                                 | rst Name)                      | 2. Surname (Last Name)<br>Pedersen | 3. Date<br>12-January-2014                                 |
| 4. Are you the corresponding author?                         |                                | Yes 🖌 No                           | Corresponding Author's Name<br>Truike Thien                |
| 5. Manuscript Title<br>Periprosthetic fe<br>Association data | emoral fracture within         | 2 years after THR. Analysi         | s of 437629 operations in the Nordic Arthroplasty Registry |
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|--|--------------------------------|-------------------------------------|--|
| 1. Given Name (Fi<br>Søren                                   | rst Name)                      | 2. Surname (Last Name)<br>Overgaard | 3. Date<br>12-January-2014                               |
| 4. Are you the cor   | responding author?             | Yes 🖌 No                            | Corresponding Author's Name<br>Truike Thien              |
| 5. Manuscript Title<br>Periprosthetic fe<br>Association data | emoral fracture within         | 2 years after THR. Analysis         | of 437629 operations in the Nordic Arthroplasty Registry |
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| 4. Are you the corresponding author?                         |                                | Yes 🖌 No                         | Corresponding Author's Name<br>Truike Thien                |
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| Section 1.   | Identifying Infor                | mation                             |  |
|--|----------------------------------|------------------------------------|--|
| 1. Given Name (Fi<br>Johan                                   | rst Name)                        | 2. Surname (Last Name)<br>Kärrholm | 3. Date<br>12-January-2014                                 |
| 4. Are you the corresponding author? Yes                     |                                  | Yes 🖌 No                           | Corresponding Author's Name<br>Truike Thien                |
| 5. Manuscript Title<br>Periprosthetic fe<br>Association data | moral fracture within            | 2 years after THR. Analysi         | s of 437629 operations in the Nordic Arthroplasty Registry |
| 6. Manuscript Ider<br>JBJS-D-13-00643                        | ntifying Number (if you k<br>3R2 | know it)                           |  |

## Section 2. The Work Under Consideration for Publication

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🖌 No

| Are there any relevant conflicts of interest? |  | Yes |
|---|--|-----|
|---|--|-----|

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Are there any relevant conflicts of interest?  $\Box$  Yes  $\checkmark$  No

| Do you have any patents, whether planned, penuing of issued, broadly relevant to the work?     res   $\mathbf{v}$   no | e any patents, whether planned, pending or issued, broadly relevant to | the work? | Yes | 🖌 No |
|--|--|-----------|-----|------|
|--|--|-----------|-----|------|



# Section 5. Relationships not covered above

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Dr. Kärrholm has nothing to disclose.

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| Section 1.   | Identifying Infor              | mation                            |  |
|--|--------------------------------|-----------------------------------|--|
| 1. Given Name (Fi  | rst Name)                      | 2. Surname (Last Name)<br>Havelin | 3. Date<br>12-January-2014                                 |
| 4. Are you the corresponding author?                         |                                | Yes 🖌 No                          | Corresponding Author's Name<br>Truike Thien                |
| 5. Manuscript Title<br>Periprosthetic fe<br>Association data | moral fracture within          | 2 years after THR. Analysi        | s of 437629 operations in the Nordic Arthroplasty Registry |
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| Are there any relevant conflicts of interest? |  | Yes | $\checkmark$ | 1 |
|---|--|-----|--------------|---|
|---|--|-----|--------------|---|

| Do you have any patents, whether planned, pending or issued, broadly relevant to the work? $\;[$ | Yes  | 🖌 No |  |
|--|------|------|--|
| bo you have any patents, whether planned, penaing of issued, broadly relevant to the work.       | 1.05 |      |  |



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| Section 1.   | Identifying Infor              | mation                              |  |
|--|--------------------------------|-------------------------------------|--|
| 1. Given Name (Fi<br>Göran                                   | rst Name)                      | 2. Surname (Last Name)<br>Garellick | 3. Date<br>12-January-2014                                 |
| 4. Are you the cor   | responding author?             | Yes 🖌 No                            | Corresponding Author's Name<br>Truike Thien                |
| 5. Manuscript Title<br>Periprosthetic fe<br>Association data | moral fracture within          | 2 years after THR. Analysis         | s of 437629 operations in the Nordic Arthroplasty Registry |
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| 1. Given Name (Fin<br>Ove                                    | rst Name)                     | 2. Surname (Last Name)<br>Furnes | 3. Date<br>12-January-2014                                 |
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? 🗌 Yes 🖌 No



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

## 5. 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 Povalties: Funds are coming in to you or your institution due to you



| Section 1.   | Identifying Infor                | mation                                 |   |
|--|----------------------------------|--|---|
| 1. Given Name (Fi<br>Georgios                                | rst Name)                        | 2. Surname (Last Name)<br>Chatziagorou | 3. Date<br>12-January-2014                              |
| 4. Are you the cor   | responding author?               | Yes 🖌 No                               | Corresponding Author's Name<br>Truike Thien             |
| 5. Manuscript Title<br>Periprosthetic fe<br>Association data | moral fracture within            | 2 years after THR. Analysis            | of 437629 operations in the Nordic Arthroplasty Registr |
| 6. Manuscript Ide<br>JBJS-D-13-00643                         | ntifying Number (if you l<br>3R2 | know it)                               |   |

## Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

🖌 No

| Are there any relevant conflicts of interest? | Yes |
|---|-----|
|---|-----|

# Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were **present during the 36 months prior to publication**.

No

| Are there any relevant conflicts of interest? |  | Yes | $\checkmark$ | 1 |
|---|--|-----|--------------|---|
|---|--|-----|--------------|---|

| Do you have any patents, whether planned | , pending or issued, broadly relevant to the work? [ | Yes | 🖌 No |
|--|--|-----|------|
|  |  |     |      |



# 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. Chatziagorou has nothing to disclose.

### **Evaluation and Feedback**