ICMJE INTERNATIONAL COMMITTEE of MEDICAL JOURNAL EDITORS

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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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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Section 1. Identifying Information

1. Given Name (First Name): Kevin
2. Surname (Last Name): Bozic
3. Date: 24-March-2016

4. Are you the corresponding author? ☐ Yes ☑ No

Corresponding Author's Name: Eric Swart

5. Manuscript Title: ORIF or Arthroplasty for Displaced Femoral Neck Fractures in Patients Under 65: An Economic Decision Analysis

6. Manuscript Identifying Number (if you know it):

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Are there any relevant conflicts of interest? ☑ Yes ☐ No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Institute for Healthcare Improvement	☐	☑	☐	☐	Consultant
Harvard Business School	☐	☑	☐	☐	Visiting Scholar
Centers for Medicare and Medicaid Services	☐	☑	☐	☐	Consultant
Agency for Healthcare Research and Quality	☑	☐	☐	☐	
National Institutes for Health	☑	☐	☐	☐	
California Public Employees' Retirement System	☑	☐	☐	☐	

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Section 4. Intellectual Property -- Patents & Copyrights

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Governance/Leadership Roles:
American Academy of Orthopaedic Surgeons (AAOS) (Council on Research and Quality)
American Association of Hip and Knee Surgeons (AAHKS) (Health Policy, EBPC)
American Joint Replacement Registry (AJRR) (Board of Directors)

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Section 6. Disclosure Statement

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Dr. Bozic reports personal fees from Institute for Healthcare Improvement , personal fees from Harvard Business School , personal fees from Centers for Medicare and Medicaid Services , grants from Agency for Healthcare Research and Quality , grants from National Institutes for Health , grants from California Public Employees' Retirement System , outside the submitted work; and Governance/Leadership Roles:
American Academy of Orthopaedic Surgeons (AAOS) (Council on Research and Quality)
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name): Madhav
2. Surname (Last Name): Karunakar
3. Date: 24-March-2016

4. Are you the corresponding author? ☐ Yes ☑ No

Corresponding Author's Name: Eric Swart

5. Manuscript Title: ORIF or Arthroplasty for Displaced Femoral Neck Fractures in Patients Under 65: An Economic Decision Analysis

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Dr. Karunakar has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name): Daniel
2. Surname (Last Name): Leas
3. Date: 24-March-2016

4. Are you the corresponding author? ☐ Yes ☑ No

Corresponding Author's Name: Eric Swart

5. Manuscript Title: ORIF or Arthroplasty for Displaced Femoral Neck Fractures in Patients Under 65: An Economic Decision Analysis

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Section 1. Identifying Information

1. Given Name (First Name): Paulvalery
2. Surname (Last Name): Roulette
3. Date: 24-March-2016

4. Are you the corresponding author? ☐ Yes ☑ No

Corresponding Author's Name: Eric Swart

5. Manuscript Title: ORIF or Arthroplasty for Displaced Femoral Neck Fractures in Patients Under 65: An Economic Decision Analysis

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Section 1. Identifying Information

1. Given Name (First Name): Eric
2. Surname (Last Name): Swart
3. Date: 24-March-2016

4. Are you the corresponding author? [✓] Yes [ ] No

5. Manuscript Title: ORIF or Arthroplasty for Displaced Femoral Neck Fractures in Patients Under 65: An Economic Decision Analysis

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