

#### **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.

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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

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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

Fortier 1



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Lisa	2. Surname (Last Name) Fortier		3. Date 17-November-2016
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author	
5. Manuscript Title Arthroscopic Delivery of Concentrated Cartilage Repair: A One Year Study in Ed	quids	hout Concomitant M	icrofracture Supports Full-Thickness
6. Manuscript Identifying Number (if you kr	now it)	_	
Section 2. The Work Under Co	onsideration for Public	cation	
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	but not limited to grants, da		ent, commercial, private foundation, etc.) for udy design, manuscript preparation,
•	ormation below. If you hav	e more than one enti	ity press the "ADD" button to add a row.
Name of Institution/Company	Grant'	n-Financial upport?	Comments
NIH	<b>✓</b>		RC2 PI
Section 3. Relevant financial	activities outside the s	submitted work.	
Place a check in the appropriate boxes i of compensation) with entities as descri clicking the "Add +" box. You should rep Are there any relevant conflicts of interes	bed in the instructions. Us port relationships that we	se one line for each e	ntity; add as many lines as you need by
Section 4. Intellectual Proper	ty Patents & Copyri	ghts	
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the	work? ☐ Yes ✓ No

Fortier 2



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Section 6. Disclosure Statement
Disclosure Statement
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Dr. Fortier reports grants from NIH, during the conduct of the study.

## **Evaluation and Feedback**

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Fortier 3



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earning royalties or not

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Williams 1



Section 1. Identifyin	g Information			
1. Given Name (First Name) Ashley	2. Surname (Last Nam Williams	ne)	3. Date 13-Dec	cember-2016
4. Are you the corresponding au	thor? Yes Vo	-	ding Author's Name e R. Chu, MD	
5. Manuscript Title Arthroscopic Delivery of Conc Cartilage Repair: A One Year S	entrated Bone Marrow Aspirate tudy in Equids	e Without Conco	mitant Microfracture Su	upports Full-Thickness
6. Manuscript Identifying Numbe	r (if you know it)			
Section 2. The Work	Under Consideration for Pu	ublication		
	<b>time</b> receive payment or services (including but not limited to grant			
Are there any relevant conflict		No		NDD#
Excess rows can be removed by	priate information below. If you by pressing the "X" button.	i nave more thar	one entity press the F	ADD button to add a row.
Name of Institution/Compan	y Grant? Personal Fees?	Non-Financial Support?	Other? Comments	
NIH	<b>V</b>		R01 PI Chu	
NIH	<b>✓</b>		RC2 PI Chu	
Section 3. Relevant f	inancial activities outside t	he submitted	work.	
of compensation) with entities	te boxes in the table to indicate s as described in the instruction should report relationships that	ıs. Use one line fo	or each entity; add as m	any lines as you need by
Are there any relevant conflict				
Section 4. Intellectua	l Property Patents & Cop	yrights		
Do you have any patents, whe	ther planned, pending or issued	d, broadly releva	nt to the work?	es 🗸 No

Williams 2



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Ashley Williams reports grants from NIH, grants from NIH, during the conduct of the study; .

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Jaramillo 1



Section 1.		••		
	Identifying Inform	ation		
1. Given Name (Fi Diego	rst Name)	2. Surname (Last Name) Jaramillo		Date -November-2016
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Constance R. Chu, MD	
•		-	nout Concomitant Microfractu	re Supports Full-Thickness
6. Manuscript Ide	ntifying Number (if you kr	now it)		
Section 2.	The Work Under Co	onsideration for Public	ation	
any aspect of the s statistical analysis,	submitted work (including etc.)?	but not limited to grants, da	a third party (government, commo a monitoring board, study design	ercial, private foundation, etc.) for n, manuscript preparation,
Are there any rel	evant conflicts of intere	est?		
Section 3.				
Section 3.	Relevant financial	activities outside the s	ubmitted work.	
of compensation	n) with entities as descri	bed in the instructions. Us	ether you have financial relatio e one line for each entity; add e <b>present during the 36 mon</b>	as many lines as you need by
•	evant conflicts of intere	·	, p	and prior to publication
Section 4.	Intellectual Proper	rty Patents & Copyrig	hts	
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work?	Yes ✓ No

Jaramillo 2



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Dr. Jaramillo has nothing to disclose.

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Payne 1



Section 1.	Identifying Inform	ation	
1. Given Name (Fi Karin	rst Name)	2. Surname (Last Name) Payne	3. Date 17-November-2016
4. Are you the cor	responding author?	☐ Yes ✓ No	Corresponding Author's Name Constance R. Chu, MD
•		-	hout Concomitant Microfracture Supports Full-Thickness
6. Manuscript Idei	ntifying Number (if you kn	ow it)	
Section 2.	The Work Under Co	onsideration for Public	ation
any aspect of the s statistical analysis,	submitted work (including	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,
	L		
Section 3.	Relevant financial	activities outside the s	ubmitted work.
of compensation clicking the "Add	n) with entities as descri	bed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amount e one line for each entity; add as many lines as you need by e <b>present during the 36 months prior to publication</b> .
Section 4.	Intellectual Proper	ty Patents & Copyrig	hts
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No

Payne 2



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Dr. Payne has nothing to disclose.

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1

McCarrel



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Taralyn	2. Surname (Last Name) McCarrel		3. Date 17-November-2016
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author	
5. Manuscript Title Arthroscopic Delivery of Concentrated I Cartilage Repair: A One Year Study in Ec 6. Manuscript Identifying Number (if you kn	quids .	hout Concomitant M	icrofracture Supports Full-Thickness
o. Manascript racintlying Number (ii you ki		_	
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any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, datest? Yes No	ata monitoring board, st	
If yes, please fill out the appropriate info 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 Support?	Comments
NIH	<b>✓</b>		RO1 PI Constance Chu
Section 3. Relevant financial	activities outside the s	submitted work.	
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McCarrel 2



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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

Chu 1



Castion 1			
Section 1. Identifying Inform	nation		
Given Name (First Name)  Constance	2. Surname (Last Name) Chu		3. Date 13-December-2016
4. Are you the corresponding author?	✓ Yes No		
5. Manuscript Title Arthroscopic Delivery of Concentrated Cartilage Repair: A One Year Study in Ed	quids .	ut Concomitant Microfrac	cture Supports Full-Thickness
6. Manuscript Identifying Number (if you kr	now it)		
Section 2. The Work Under Co	onsideration for Publicat	ion	
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 intered If yes, please fill out the appropriate info	s but not limited to grants, data rest?  Yes  No Dormation below. If you have n	nonitoring board, study desi	ign, manuscript preparation,
Name of Institution/Company	Grant? Personal Non-F	onancial Other? Com	ments
NIH	<b>✓</b> [	R01 PI (	Chu
NIH	<b>✓</b> [	RC2 PI 0	Chu
Section 3. Relevant financial	activities outside the sub	mitted work.	
Place a check in the appropriate boxes in the appropriate boxes of compensation) with entities as describing the "Add +" box. You should re	bed in the instructions. Use o	ne line for each entity; ad	dd as many lines as you need by
Are there any relevant conflicts of interest	est?		
Section 4. Intellectual Proper	rty Patents & Copyright	s	
Do you have any patents, whether plan	ned, pending or issued, broad	dly relevant to the work?	☐ Yes 🗸 No

Chu 2



Section 5. Polationships 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
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. Chu reports grants from NIH, grants from NIH, during the conduct of the study; .

## **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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#### **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.

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

Bowers 1



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Megan	2. Surname (Last Name) Bowers	3. Date 17-November-2016	
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Constance R. Chu, MD	
5. Manuscript Title Arthroscopic Delivery of Concentrated Bone Marrow Aspirate Without Concomitant Microfracture Supports Full-Thickness Cartilage Repair: A One Year Study in Equids 6. Manuscript Identifying Number (if you know it)			
Section 2. The Work Under Consideration for Publication			
Did you or your institution <b>at any time</b> 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.)?  Are there any relevant conflicts of interest?  Yes  Volume 1  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 <b>present during the 36 months prior to publication</b> .  Are there any relevant conflicts of interest? Yes Vo			
Section 4. Intellectual Proper	rty Patents & Copyrig	hts	
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo			

Bowers 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
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Sortion 6
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. Bowers has nothing to disclose.

## **Evaluation and Feedback**

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