

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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earning royalties or not

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

Bernthal 1



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Nicholas	2. Surname (Last Name) Bernthal		3. Date 01-September-2017
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Nam Jonathan Braman	ne
5. Manuscript Title I am what I am because of who we all a	re: The 2017 American, Bri	tish, and Canadian Traveling	ı Fellowship
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	g but not limited to grants, da		
Section 3. Relevant financial	activities outside the s	submitted work	
Place a check in the appropriate boxes in of compensation) with entities as described the "Add +" box. You should replace there any relevant conflicts of interests.	in the table to indicate wh ibed in the instructions. Us port relationships that wer	ether you have financial rela se one line for each entity; ac	dd as many lines as you need by
Section 4. Intellectual Proper	rty Patents & Copyric	ahts	
Do you have any patents, whether plan			☐ Yes ✓ No

Bernthal 2



Section 5. Relationships not severed above
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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. Bernthal has nothing to disclose.

Evaluation and Feedback

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Bernthal 3



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Braman 1



1. Given Name (First Name) Jonathan Braman 1. Given Name (First Name) Jonathan Braman 1. Given Name (First Name) Braman 1. Given Name (First Name) Jonathan Braman 1. Given Name (Last Name) Jonathan J	Section 1. Identifying Inform	ation			
5. Manuscript Title 1 am what I am because of who we all are: The 2017 American, British, and Canadian Traveling Fellowship 6. Manuscript Identifying Number (if you 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.)? Are there any relevant conflicts of interest?	Given Name (First Name)	2. Surname (Last Name)			
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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?	Section 2. The Work Under Co	onsideration for Pub	lication		
If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button. Name of Institution/Company Grant? Personal Support? Other? Comments The AOA, BOA, and COA funded this britippedic Association, and Canadian orthopaedic Association. The AOA, BOA, and COA funded this britippedic Association. 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. Are there any relevant conflicts of interest? Yes No Section 4. Intellectual Property Patents & Copyrights	any aspect of the submitted work (including				
Name of Institution/Company Grant? Personal Support? Grant? Personal Support? The AOA, BOA, and COA funded this trip. 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. Are there any relevant conflicts of interest? Yes No Section 4. Intellectual Property Patents & Copyrights	Are there any relevant conflicts of interest	est? ✓ Yes No			
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intellectual Property Patents & Copyrights	Are there any relevant conflicts of intere	est?			
intellectual Property Patents & Copyrights					
	Section 4. Intellectual Proper	rtv Patents & Copyr	riahts		
				nt to the	work? ☐ Yes ✓ No

Braman 2



Section 5. Relationships not severed shove
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Service 6
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Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Braman reports other from American Orthopaedic Association, British Orthopaedic Association, and Canadian Orthopaedic Association, during the conduct of the tour.

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Braman 3



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Strauss 1



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Eric	2. Surname (Last Name) Strauss		3. Date 06-September-2017
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Nar Jonathan Braman	ne
5. Manuscript Title I am what I am because of who we all a	re: The 2017 American, Bri	tish, and Canadian Traveling	g Fellowship
6. Manuscript Identifying Number (if you kr JBJS-D-17-00812R1	now it)		
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Do you have any patents, whether plan			Yes 🗸 No

Strauss 2



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Freedman 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fil Brett	rst Name)	2. Surname (Last Name) Freedman	3. Date 28-July-2017
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Jonathan Braman
5. Manuscript Title I am what I am b		re: The 2017 American, Bri	tish, and Canadian Traveling Fellowship
6. Manuscript Ider	ntifying Number (if you kr	now it)	
			_
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Freedman 2



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Gofton 1



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4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Autl	
5. Manuscript Title I am what I am because of who we all a	re: The 2017 American, Bri	tish, and Canadian T	raveling Fellowship,
6. Manuscript Identifying Number (if you kr JBJS-D-17-00812R1	now it)	_	
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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	g but not limited to grants, da	. , .	nent, commercial, private foundation, etc.) for study design, manuscript preparation,
Section 3. Relevant financial	activities outside the s	ubmitted work.	
	ibed in the instructions. Us port relationships that wer est?	se one line for each o	ncial relationships (regardless of amount entity; add as many lines as you need by he 36 months prior to publication.
Name of Entity	Grant? Personal Nor	n-Financial Other	Comments
Biomet Zimmer			Education events
Microport State of the state of			Education events
Depuy Synthes	V		unrestricted institutional research grant
Section 4. Intellectual Proper	rty Patents & Copyric	ghts	
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to th	e work?

Gofton 2



Section 5. Polationships 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 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. Gofton reports personal fees from Biomet Zimmer, personal fees from Microport, grants from Depuy Synthes, outside the submitted work; .

Evaluation and Feedback

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Gofton 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".

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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.

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Definitions.

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

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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

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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

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Section 1.	Identifying Inform	nation			
1. Given Name (Fii Joseph	rst Name)	2. Surname (Last Name) Hsu		3. Date 06-August-2017	
4. Are you the cor	responding author?	☐ Yes ✓ No	Corresponding Author's Name Jonathan Braman		
5. Manuscript Title "I am what I am k		are: The 2017 American, B	ritish, and Canadian T	raveling Fellowship,"	
6. Manuscript Ider	ntifying Number (if you kr	now it)			
Section 2.	The Work Under C	onsideration for Publi	cation		
any aspect of the s statistical analysis,	ubmitted work (including	g but not limited to grants, d		nent, commercial, private foundation, etc.) for tudy design, manuscript preparation,	
Section 3.	Relevant financial	activities outside the	submitted work.		
of compensation clicking the "Add) with entities as descr	ibed in the instructions. U port relationships that we	se one line for each e	cial relationships (regardless of amount ntity; add as many lines as you need by e 36 months prior to publication.	
	out the appropriate info				
Name of Entity		Grant	n-Financial Support?	Comments	
Smith Nephew				Speaker bureau	
Acumed				Consulting	
Section 4.	Intellectual Proper	rty Patents & Copyri	ghts		
Do you have any	patents, whether plan	ned, pending or issued, b	roadly relevant to the	e work? ☐ Yes ✓ No	

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Section 5. Relationships not covered above
Relationships not covered above
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Section 6
Section 6. Disclosure Statement
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Dr. Hsu reports personal fees from Smith Nephew, personal fees from Acumed, outside the submitted work; .

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

Sheps 1



Section 1.	Identifying Inform	nation			
1. Given Name (First Name) David		2. Surname (Last Name) Sheps		3. Date 08-August-2017	
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's N Jonathan Braman	lame	
5. Manuscript Title "I am what I am because of who we all are: The 2017 American, British, and Canadian Traveling Fellowship"					
6. Manuscript Ider	ntifying Number (if you kr	now it)			
Section 2.	The Work Under Co	onsideration for Publ	ication		
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.)? Are there any relevant conflicts of interest? Yes Vo					
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 .					
Are there any relevant conflicts of interest? Yes No If yes, please fill out the appropriate information below.					
Name of Entity		Grant? Personal No	on-Financial Other? Co	omments	
		Fees	Support?		
Arthrex					
Conmed-Linvatec					
Section 4.	Intellectual Proper	rty Patents & Copyr	ights		
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo					

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Section 5.				
Section 5.	Relationships not covered above			
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Sections				
Section 6.	Disclosure Statement			
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