

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.

The work under consideration for publication.

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Relevant financial activities outside the submitted work.

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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

1 Spitzer



Section 1. Identifying Inform	ation		
1. Given Name (First Name) Andrew	2. Surname (Last Name) Spitzer		3. Date 29-January-2017
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Auth Professor Philip G	
5. Manuscript TitleEffects of a Single Intra-Articular InjectioPain: A double-blind, randomized, place6. Manuscript Identifying Number (if you known)	ebo-controlled, multination		one Acetonide on Knee Osteoarthritis
Section 2. The Work Under Co	onsideration for Public	ation	
Did you or your institution at any time receivany 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 tudy design, manuscript preparation,
Section 3. Relevant financial a	activities outside the s	ubmitted work.	
Place a check in the appropriate boxes in of compensation) with entities as describle clicking the "Add +" box. You should rep	oed in the instructions. Us	e 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? Personal Nor	n-Financial other?	Comments
-lexion Therapeutics			Consulting
Sanofi Biosurgical			Consulting
DePuy			Consulting and Research Support
Section 4. Intellectual Propert	ty Patents & Copyrig	ıhts	
Do you have any patents, whether plann			e work?

Spitzer 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
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
Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Spitzer reports personal fees from Flexion Therapeutics, personal fees from Sanofi Biosurgical, personal fees from DePuy, 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.

Spitzer 3



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

Burgess 1



Section 1. Identifying Inform	ation			
Given Name (First Name) Diane Jane	2. Surname (Last Name) Burgess		3. Date 13-December-2016	
4. Are you the corresponding author?	Yes ✓ No	Corresponding Autho Philip G. Conaghan	or's Name	
Manuscript Title Effects of a single intra-articular injectio pain		lation of triamcinolon	e acetonide on knee osteoarthritis	
Manuscript Identifying Number (if you kn	ow it)	_		
Section 2. The Work Under Co	onsideration for Public	ation		
Did you or your institution at any time recei any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intereinf If yes, please fill out the appropriate info	but not limited to grants, da	ta monitoring board, stu	udy design, manuscript preparation,	
Excess rows can be removed by pressing	•			_
Name of Institution/Company	Grant	n-Financial other?	Comments	
University of Connecticut	✓			_
Section 3. Relevant financial	activities outside the s	ubmitted 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 intere	bed in the instructions. Us port relationships that wer	se one line for each en	itity; add as many lines as you need by	
Section 4. Intellectual Proper	ty Patents & Copyrig	hts		
Do you have any patents, whether plant	ned, pending or issued, br	oadly relevant to the v	work? Yes V No	

Burgess 2



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Section 6. Disclosure Statement
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Dr. Burgess reports grants from University of Connecticut, during the conduct of the study.

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Burgess 3



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

Hunter 1



Section 1.	Identifying Inform	ation					
1. Given Name (Fi David	rst Name)	2. Surnam Hunter	ie (Last Name)		3. Date 08-Decem	nber-2016	
4. Are you the cor	responding author?	Yes	√ No	Corresponding Autl	hor's Name		
pain. A double-b	e e intra-articular injectio Ilind, randomized, placo ntifying Number (if you kr	ebo-contro			one acetonide on k	nee osteoarthritis	
				_			
Section 2.	The Work Under Co	onsiderati	ion for Public	cation			
any aspect of the s statistical analysis,	stitution at any time rece ubmitted work (including etc.)? evant conflicts of intere	but not limi		. , .	•		c.) for
Section 3.	Relevant financial	activities	outside the s	ubmitted work.			
of compensation clicking the "Add Are there any rel	the appropriate boxes in the appropriate boxes in the second of the seco	bed in the poort relation est?	instructions. Us nships that wer es	se one line for each	entity; add as man	y lines as you need	
Name of Entity		Grant?		n-Financial Other	Comments		
Consultant for Merck	Serono and Flexion		✓				
Section 4.	Intellectual Proper	ty Pate	nts & Copyrig	yhts			
Do you have any	patents, whether plan	ned, pendir	ng or issued, br	oadly relevant to th	e work? Yes	✓ No	

Hunter 2



Section 5. Relationships not covered above
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Section 6. Disclosure Statement
Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Hunter reports personal fees from Consultant for Merck Serono and Flexion, outside the submitted work.

Evaluation and Feedback

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Hunter 3



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Jevsevar 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi David	rst Name)	2. Surname (Last Name) Jevsevar	3. Date 20-April-2017
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Philip Conaghan
	e Intra-Articular Injection	on of a Microsphere-Formi ebo-controlled, multinatio	ulation of Triamcinolone Acetonide on Knee Osteoarthritis nal study
	ntifying Number (if you kr		,
			_
Section 2.	The Work Under Co	onsideration for Public	cation
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,
Section 3.	Relevant financial	activities outside the s	submitted 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 se one line for each entity; add as many lines as you need by e present during the 36 months prior to publication .
Section 4.	Intellectual Proper	rty Patents & Copyric	uhts
Do you have any			oadly relevant to the work? Yes V No

Jevsevar 2



Section 5. Belationships not sourced 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
Board of Directors, American Academy of Orthopaedic Surgeons
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statement 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. Jevsevar reports and Board of Directors, American Academy of Orthopaedic Surgeons.

Evaluation and Feedback

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Jevsevar 3



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

Jones 1



Section 1.	Identifying Infor	mation		
1. Given Name (F Deryk	ïrst Name)	2. Surname (Last Name) Jones		3. Date 19-December-2016
4. Are you the co	rresponding author?	Yes ✓ No	Corresponding Aut	
-	le intra-articular inject	ion of a microsphere-formu acebo-controlled, multi-nat		one acetonide on knee osteoarthritis
6. Manuscript Ide	entifying Number (if you	know it)		
			_	
Section 2.	The Work Under	Consideration for Publi	cation	
	submitted work (including			ment, commercial, private foundation, etc.) fo study design, manuscript preparation,
Are there any re	elevant conflicts of inte	erest? Yes Vo		
C 41 2				
Section 3.	Relevant financia	l activities outside the	submitted work.	
of compensatio	n) with entities as desc	cribed in the instructions. U	se one line for each	ncial relationships (regardless of amount entity; add as many lines as you need by he 36 months prior to publication.
_	elevant conflicts of inte	· ·	e present daning to	ne so months prior to publication.
If yes, please fill	out the appropriate in	formation below.		
Name of Entity		Grant? Personal No	n-Financial Support?	Comments
Flexion		✓	паррогс	Clinical Trial (<\$10,000)
Sanofi				Consultant (<\$10,000)
Samumed				Consultant (<\$10,000)
Depuv Mitek				Consultant (>\$10,000)

Jones 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. Jones reports grants from Flexion, other from Sanofi, other from Samumed (all <\$10,000), other from Depuy Mitek (>\$10,000), outside the submitted work.

Evaluation and Feedback

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Jones 3



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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



Section 1. Id	entifying Inform	ation				
1. Given Name (First Na Francis	ame)	2. Surname (L Berenbaum	ast Name)			3. Date 21-April-2017
4. Are you the correspo	onding author?	Yes ✓	No	Correspond Philip CON	_	r's Name
5. Manuscript TitleEffects of a Single IntPain. A double-blind6. Manuscript Identifyi	, randomized, place	bo-controlled			amcinolo	ne Acetonide on Knee Osteoarthritis
Section 2. Th	e Work Under Co	nsideration	for Publi	ration		
Did you or your institut	ion at any time receivitted work (including	ve payment or s	ervices from	a third party (ent, commercial, private foundation, etc.) for udy design, manuscript preparation,
Are there any relevar		st? ✓ Yes	No			
			•	e more than	one enti	ty press the "ADD" button to add a row.
Excess rows can be re	inoved by pressing			. Financial		
Name of Institution/	Company	Grant		n-Financial upport	Other	Comments
lexion			✓			
Section 3. Re	levant financial a	activities ou	tside the s	submitted v	work.	
of compensation) wi	th entities as describ	oed in the inst	ructions. U	se one line fo	r each en	ial relationships (regardless of amount tity; add as many lines as you need by 36 months prior to publication.
Are there any relevar	nt conflicts of intere	st? ✓ Yes	No			
If yes, please fill out t	he appropriate info	rmation belov	٧.			
Name of Entity		Grant	_	n-Financial upport [?]	Other?	Comments
lexion					✓	Flexion
Pfizer			✓			
AbbVie			√			



Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
MerckSerono		✓			
ervier	\checkmark	\checkmark			
xpanscience		\checkmark			
ianofi		√			
JCB		\checkmark			
Novartis		\checkmark			
Biogaran		\checkmark			
Biogen		\checkmark			
anssen		\checkmark			
RB Chemedica	✓				
BSA		✓			

Section 4.	Intellectual Property Patents & Copyrights
Do you have any	patents, whether planned, pending or issued, broadly relevant to the work? Yes V No
Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
	wing relationships/conditions/circumstances are present (explain below): tionships/conditions/circumstances that present a potential conflict of interest
A	

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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. Berenbaum reports personal fees from Flexion, during the conduct of the study; other from Flexion, personal fees from Pfizer, personal fees from AbbVie, personal fees from MerckSerono, grants and personal fees from Servier, personal fees from Expanscience, personal fees from Sanofi, personal fees from UCB, personal fees from Novartis, personal fees from Biogaran, personal fees from Biogen, personal fees from Janssen, grants from TRB Chemedica, personal fees from IBSA, outside the submitted work.

Evaluation and Feedback

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Instructions

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Lieberman 1



Section 1. Identifying Inform	nation					
1. Given Name (First Name) Jay	2. Surname (Last Name) Lieberman	3. Date 20-April-2017				
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Philip Conaghan				
5. Manuscript Title Effects of a Single Intra-Articular Injection of a Microsphere-Formulation of Triamcinolone Acetonide on Knee Osteoarthritis Pain. A double-blind, randomized, placebo-controlled, multinational study 6. Manuscript Identifying Number (if you know it)						
Section 2. The Work Under Co	onsideration for Publi	cation				
	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,				
Section 3. Relevant financial	activities outside the s	submitted work.				
of compensation) with entities as descri	bed in the instructions. Use port relationships that we est?	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.				
Name of Entity	Grant? Personal Fees? S	n-Financial other? Comments				
DePuy, Inc.		Royalties				
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 V No				

Lieberman 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):
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Dr. Lieberman reports other from DePuy, Inc., outside the submitted work.

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Lieberman 3



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

Lufkin 1



Section 1						
Section 1. Identifying Inform	nation					
1. Given Name (First Name) Joelle	2. Surname (Last Name) Lufkin	3. Date 14-December-2016				
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Philip G. Conaghan				
5. Manuscript Title Effects of a single intra-articular injection of a microsphere-formulation of triamcinolone acetonide on knee osteoarthritis pain. A double-blind, randomized, placebo-controlled, multinational study 6. Manuscript Identifying Number (if you know it)						
Section 2. The Work Under C	onsideration for Public	cation				
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 No 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 pressin	g the "X" button.					
Name of Institution/Company	Grant'	ort? Comments				
Flexion Therapeutics		✓ employee				
Section 3. Relevant financial	activities outside the s	submitted work.				
of compensation) with entities as descr	ibed in the instructions. Us port relationships that wer est?	ether you have financial relationships (regardless of amous se one line for each entity; add as many lines as you need b re present during the 36 months prior to publication .				
Name of Entity	Grant	on-Financial Other? Comments				
Flexion Therapeutics		✓ emplovee				

Lufkin 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
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Dr. Lufkin reports other from Flexion Therapeutics, outside the submitted work.

Evaluation and Feedback

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Lufkin 3



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JOHNSON 1



Section 1.	Identifying Inforn	nation							
1. Given Name (Fire	st Name)	2. Surnai JOHNSC	me (Last Name)N	e)		3. Date 24-April-2017			
4. Are you the corre	esponding author?	Yes	√ No	-	Corresponding Author's Name Philip G Conaghan MBBS PhD FRACP FRCP				
	5. Manuscript Title Effects of a Single Intra-Articular Injection of a Microsphere-Formulation of Triamcinolone Acetonide on Knee Osteoarthritis Pain: A double-blind, randomized, placebo-controlled, multinational study								
6. Manuscript Iden	tifying Number (if you k	now it)							
Section 2.									
Section 2.	The Work Under C	onsidera	tion for Pul	olication					
	ıbmitted work (including					ent, commercial, private foundation, etc.) for udy design, manuscript preparation,			
-	evant conflicts of inter	est?	Yes No	0					
			•	have more thar	one enti	ity press the "ADD" button to add a row.			
Excess rows can b	e removed by pressin	ig the "X" b							
Name of Instituti	on/Company	Grant?	Personal N	Non-Financial Support?	Other?	Comments			
FLEXION THERAPEUTI	CS		√			BIOSTATISTICAL ANALYSIS			
Section 3.	Relevant financial	activities	s outside th	e submitted	work.				
of compensation)	with entities as descr	ibed in the	instructions.	. Use one line fo	or each er	cial relationships (regardless of amount ntity; add as many lines as you need by e 36 months prior to publication.			
•	evant conflicts of inter			0					
If yes, please fill o	ut the appropriate inf	ormation b	pelow.						
Name of Entity		Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments			
ACURA PHARMACEUT	ICALS		✓			BIOSTATISTICAL ANALYSIS			
ROKO PHARMACEUTI	CALS		✓			BIOSTATISTICAL ANALYSIS			
X BIOPHARMA			✓			PHARMACOKINETICS ANALYSIS			

JOHNSON 2



Section 4. Intellectual Property Patents & Copyrights
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Volume
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Dr. JOHNSON reports personal fees from FLEXION THERAPEUTICS, during the conduct of the study; personal fees from ACURA PHARMACEUTICALS, personal fees from IROKO PHARMACEUTICALS, personal fees from IX BIOPHARMA, outside the submitted work.

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JOHNSON 3



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Section 1. Identifying	Information				
1. Given Name (First Name) Neil	2. Surname (Las Bodick	i Name)		. Date 0-April-2017	
4. Are you the corresponding auth	or? Yes	No Correspondi Philip Cona	ing Author's Name aghan	•	
5. Manuscript TitleEffects of a Single Intra-ArticulaPain. A double-blind, randomize6. Manuscript Identifying Number	ed, placebo-controlled, n		amcinolone Acet	onide on Knee Osteoar	thritis
Section 2. The Work U	nder Consideration fo	or Publication			
Did you or your institution at any t any aspect of the submitted work (i statistical analysis, etc.)? Are there any relevant conflicts	ncluding but not limited to				
Section 3. Relevant fin	ancial activities outs	de the submitted v	vork.		
Place a check in the appropriate of compensation) with entities a clicking the "Add +" box. You sh Are there any relevant conflicts	as described in the instru ould report relationships	ctions. Use one line for	r each entity; add	d as many lines as you r	need by
Section 4. Intellectual	Property Patents &	Copyrights			
Do you have any patents, wheth If yes, please fill out the approp Excess rows can be removed by	riate information below.	f you have more than	ı	✓ Yes No the "ADD" button to ac	dd a row.
Patent?	Pending? Issued? Lie	censed Royalties?	Licensee?	Comments	
Corticosteroids for the treatment of oint pain			lexion herapeutics		
Corticosteroid formulations for maintaining corticosteroid synovial			lexion herapeutics		



Patent?	Pending?	Issued?	Licensed?	Royalties?	Licensee?	Comments	
Corticosteroid formulations and methods for the treatment of joint pain in patients with type 2 diabetes	√				Flexion Therapeutics		
Corticosteroid formulations and methods for the treatment of joint pain in patients with diabetes					Flexion Therapeutics		
Section 5. Relationshi	ps not cove	ered abo	ove				
potentially influencing, what yo Yes, the following relationsh No other relationships/cond	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 Employed by and hold equity in Flexion Therapeutics						
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Dr. Bodick reports In addition, Dr. Bodick has a patent Corticosteroids for the treatment of joint pain pending to Flexion Therapeutics, a patent Corticosteroid formulations for maintaining corticosteroid synovial fluid concentrations pending to Flexion Therapeutics, a patent Corticosteroid formulations and methods for the treatment of joint pain in patients with type 2 diabetes pending to Flexion Therapeutics, and a patent Corticosteroid formulations and methods for the treatment of joint pain in patients with diabetes pending to Flexion Therapeutics and Employed by and hold equity in Flexion Therapeutics.



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

Katz 1



Section 1.	Identifying Inform	nation	
1. Given Name (First Name) Nathaniel		2. Surname (Last Name) Katz	3. Date 20-April-2017
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Philip Conaghan
5. Manuscript TitleEffects of a Single Intra-Articular InjectionPain. A double-blind, randomized, place6. Manuscript Identifying Number (if you known)		ebo-controlled, multinatio	ulation of Triamcinolone Acetonide on Knee Osteoarthritis nal study
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,
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 present during the 36 months prior to publication .
Section 4.	Intellectual Proper	ty Patents & Copyri <u>c</u>	hts
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No

Katz 2



Section 5. Polotionships 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						
I am CEO of a consulting firm, working with many different companies. I have received no financial support or consideration in relation to this manuscript.						
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure stateme On occasion, journals may ask authors to disclose further information about reported relationships.	nts					
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. Katz reports and I am CEO of a consulting firm, working with many different companies. I have received no financial support or consideration in relation to this manuscript.						

Evaluation and Feedback

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Katz 3



Instructions

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

Conaghan 1



Section 1.	Identifying Inform	nation						
1. Given Name (F Philip	rst Name)	2. Surname (Last N Conaghan	lame)		3. Date 25-January-2017			
4. Are you the co	rresponding author?	✓ Yes No						
Effects of a Sing Pain	5. Manuscript Title Effects of a Single Intra-Articular Injection of a Microsphere-Formulation of Triamcinolone Acetonide on Knee Osteoarthritis Pain 6. Manuscript Identifying Number (if you know it)							
Section 2.	The Work Under C	onsideration for	Publication					
statistical analysis Are there any re	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 No							
Section 3.	Relevant financial	activities outsid	e 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? Person.	Non-Financial Support?	Other? Co	omments			
Abbvie				Cons	sultant			
lexion Therapeutics	Inc			Cons	sultant			
nfirst				Cons	sultant			
Medivir				Cons	sultant			
Marck Sarona				Con	cultant			

Conaghan 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?
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. Conaghan reports personal fees from Abbvie, personal fees from Flexion Therapeutics Inc, personal fees from Infirst, personal fees from Medivir, personal fees from Merck Serono, outside the submitted work.

Evaluation and Feedback

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

Conaghan 3



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Cohen 1



Section 1. Identifying Inform	ation			
identifying inform	adon			
1. Given Name (First Name) Stanley	2. Surname (Last Name) Cohen	3. Date 20-April-2017		
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Philip Conaghan		
 Manuscript Title Effects of a Single Intra-Articular Injectic Pain. A double-blind, randomized, place Manuscript Identifying Number (if you kn 	ebo-controlled, multinatio		one Acetonide on Knee Osteoarthritis	
Section 2. The Work Under Co	onsideration for Public	ration		
any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, dansts: Yes No ormation below. If you have the "X" button.	ta monitoring board, so	ent, commercial, private foundation, etc.) for tudy design, manuscript preparation, ity press the "ADD" button to add a row.	
Name of Institution/Company	Grant	n-Financial Other	Comments	
Flexion	✓		grantsand fes as an investigator and consultant	
Section 3. Relevant financial	activities outside the s	ubmitted work.		
Place a check in the appropriate boxes in of compensation) with entities as descri clicking the "Add +" box. You should rep Are there any relevant conflicts of intere	bed in the instructions. Us port relationships that wer	se one line for each e	ntity; add as many lines as you need by	
Section 4. Intellectual Proper	ty Patents & Copyric	jhts		
Do you have any patents, whether plant	ned, pending or issued, br	oadly relevant to the	work?	

Cohen 2



Section 5. Relationships not severed above
Relationships not covered above
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Section 6. Disclosure Statement
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Dr. Cohen reports grants and personal fees from Flexion, during the conduct of the study.

Evaluation and Feedback

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Cohen 3



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

Kraus 1



Section 1.	Identifying Inform	nation				
1. Given Name (Fi Virginia		2. Surname (Last Na Kraus	me)	3. Date 07-December-2016		
4. Are you the cor	responding author?	☐ Yes ✓ No	•	Corresponding Author's Name Philip G. Conaghan		
5. Manuscript Title Effects of a single pain		n of a microsphere-	formulation of tria	nmcinolone acetonide on kr	nee osteoarthritis	
6. Manuscript Idei	ntifying Number (if you kn	now it)				
	I					
Section 2.	The Work Under Co	onsideration for I	Publication			
	ubmitted work (including			(government, commercial, priv g board, study design, manusc		
Are there any rel	evant conflicts of intere		No			
	out the appropriate info be removed by pressing		ou have more thai	n one entity press the "ADD	button to add a row.	
Name of Institut		Grant? Persona	Non-Financial	Other? Comments		
Flexion Therapeutics				Consulting fees (<\$ received to assist winterpretation	-	
Section 3.	Relevant financial	activities outside	the submitted	work.		
of compensation) with entities as descri	bed in the instruction	ons. Use one line f	ave financial relationships (r or each entity; add as many luring the 36 months prio	lines as you need by	
Are there any rel	evant conflicts of intere	est? Yes ✓	No			
	ı					
Section 4.	Intellectual Proper	ty Patents & Co	pyrights			
Do you have any	patents, whether plan	ned, pending or issu	ed, broadly releva	ant to the work? Yes	√ No	

Kraus 2



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Kraus 3