

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Rachel

2. Surname (Last Name)

Borthwell

3. Date

21-November-2017

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Nicholas Bernthal

5. Manuscript Title

A Comparison of Defense versus Plaintiff Expert Witnesses in Orthopaedic Surgery Malpractice Litigation

6. Manuscript Identifying Number (if you know it)

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Ms. Borthwell has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Samuel

2. Surname (Last Name)
Clarkson

3. Date
21-November-2017

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name
Nicholas Bernthal

5. Manuscript Title

A Comparison of Defense versus Plaintiff Expert Witnesses in Orthopaedic Surgery Malpractice Litigation

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Section 1. Identifying Information

1. Given Name (First Name) Christopher	2. Surname (Last Name) Hamad	3. Date 21-November-2017
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Nicholas Bernthal
5. Manuscript Title A Comparison of Defense versus Plaintiff Expert Witnesses in Orthopaedic Surgery Malpractice Litigation		
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Mr. Hamad has nothing to disclose.

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Joshua

2. Surname (Last Name)

Proal

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21-November-2017

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☒ No

Corresponding Author's Name

Nicholas Bernthal

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1. Given Name (First Name) William	2. Surname (Last Name) Sheppard	3. Date 20-November-2017
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Nicholas Bernthal
5. Manuscript Title A Comparison of Defense versus Plaintiff Expert Witnesses in Orthopaedic Surgery Malpractice Litigation		
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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Ryan	2. Surname (Last Name) Smith	3. Date 19-November-2017
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Nicholas Bernthal
5. Manuscript Title A Comparison of Defense versus Plaintiff Expert Witnesses in Orthopaedic Surgery Malpractice Litigation		
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? ☐ Yes ☒ No

Section 3. Relevant financial activities outside the submitted work.

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

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☐ Yes ☒ No

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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.

Mr. Smith has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Vishal

2. Surname (Last Name)
Hegde

3. Date
21-November-2017

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name
Nicholas Bernthal

5. Manuscript Title

A Comparison of Defense versus Plaintiff Expert Witnesses in Orthopaedic Surgery Malpractice Litigation

6. Manuscript Identifying Number (if you know it)

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Dr. Hegde has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Howard	2. Surname (Last Name) Park	3. Date 14-November-2017
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Nicholas Bernthal
5. Manuscript Title A Comparison of Defense versus Plaintiff Expert Witnesses in Orthopaedic Surgery Malpractice Litigation		
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? ☐ Yes ☒ No

Section 3. Relevant financial activities outside the submitted work.

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

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☐ Yes ☒ No

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Dr. Park has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Stephen

2. Surname (Last Name)
Zoller

3. Date
05-December-2017

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name
Nicholas M. Bernthal

5. Manuscript Title

A Comparison of Defense Versus Plaintiff Expert Witnesses in Orthopaedic Surgery Malpractice Litigation

6. Manuscript Identifying Number (if you know it)

JBJS-D-17-01146R1

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? ☐ Yes ☒ No

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

Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Zoller has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Nicholas

2. Surname (Last Name)

Bernthal

3. Date

21-November-2017

4. Are you the corresponding author?

☒ Yes ☐ No

5. Manuscript Title

A Comparison of Defense versus Plaintiff Expert Witnesses in Orthopaedic Surgery Malpractice Litigation

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. 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 Fees?	Non-Financial Support?	Other?	Comments
NIH	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Section 3. Relevant financial activities outside the submitted work.

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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
Onkos	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Bone Support	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Dr. Bernthal reports grants from NIH, during the conduct of the study; personal fees from Onkos, personal fees from Bone Support, outside the submitted work; .

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