

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

1

Dhawan



Section 1.	Identifying Inform	nation	
1. Given Name (Fi Rohit	rst Name)	2. Surname (Last Name) Dhawan	3. Date 29-January-2018
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Soha Sajid
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	ntifying Number (if you kr		
			-
Section 2.	The Work Under C	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	ibed 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	rty Patents & Copyrig	ihts
Do you have any		.,	oadly relevant to the work? ☐ Yes ✓ No

Dhawan 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):
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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. Dhawan has nothing to disclose.

Evaluation and Feedback

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Dhawan 3



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

Mitra

1



Section 1. Identifying Inform	nation			
Given Name (First Name) Aveek	2. Surname (Last Name) Mitra	3. Date 01/18/2018		
4. Are you the corresponding author?	Yes 🗸 No	Corresponding Author's Name J O'Callaghan		
5. Manuscript Title British Orthopaedic Trainees' Association	on (BOTA) Meeting 2017			
6. Manuscript Identifying Number (if you k	now it)			
		_		
Section 2. The Work Under C	onsideration for Publi	cation		
Did you or your institution at any time				
Are there any relevant conflicts of interest?				
The diefe diff relevant commets of interest.				
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 inter	est? Yes ✓ No			
Section 4. Intellectual Prope	rty Patents & Copyri	ghts		
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo				

Mitra 2



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Ajwani 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi Sanil	rst Name)	2. Surname (Last Name) Ajwani	3. Date	
4. Are you the cor	responding author?	☐ Yes 🗸 No	Corresponding Author's Name H Sevenoaks	
5. Manuscript Title British Orthopae		on (BOTA) Meeting 2017		
6. Manuscript Ide	ntifying Number (if you kr	now it)		
Section 2.	The Work Under C	onsideration for Public	cation	
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Section 3.	Relevant financial	activities outside the s	submitted work.	
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Ajwani 2



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AL-HOURANI 1



Section 1. Identif	ying Information	
Given Name (First Name) KHALID	2. Surname (Last Nam AL-HOURANI	e) 3. Date 02-January-2018
4. Are you the corresponding	g author? Yes 🗸 No	Corresponding Author's Name Jamie O'Callaghan
	tography in Trauma & Orthopaedic	practice: A Severn Deanery Perspective practice: A Severn Deanery Perspective
Section 2. The Wo	ork Under Consideration for Pu	blication
Did you or your institution at	any time receive payment or services f work (including but not limited to grant	rom a third party (government, commercial, private foundation, etc.) for s, data monitoring board, study design, manuscript preparation,
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Do you have any patents,	whether planned, pending or issued	d, broadly relevant to the work? Yes Vo

AL-HOURANI 2



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Banerjee 1



Section 1. Id	entifying Informa	ation		
1. Given Name (First N Robin	lame)	2. Surname (Last Name) Banerjee		3. Date 31-January-2018
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Nai Soha Sajid	me
5. Manuscript Title British Orthopaedic	Trainees' Association	n (BOTA) Meeting 2017		
6. Manuscript Identifyi	ing Number (if you kno	ow it)		
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Banerjee 2



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Barrie 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi James	rst Name)	2. Surname (Last Name) Barrie	3. Date 06-February-2018	
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Dr H Sevenoaks	
5. Manuscript Title British Orthopae		on (BOTA) Meeting 2017		
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✓ 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. Barrie has nothing to disclose.

Evaluation and Feedback

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Barrie 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.

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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.

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.

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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

Berryman 1



Section 1. Identifying Inform	nation	
Given Name (First Name) Fiona	2. Surname (Last Name) Berryman	3. Date 17-January-2018
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Gulraj Matharu
5. Manuscript Title British Orthopaedic Trainees' Associati	on (BOTA) Meeting 2017	
6. Manuscript Identifying Number (if you k	now it)	
		_
Section 2. The Work Under C		
The Work Under C	Consideration for Public	cation
	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
•		ve more than one entity press the "ADD" button to add a row.
Excess rows can be removed by pressing		
Name of Institution/Company	Grant•	ort? Other? Comments
Smith & Nephew Orthopaedics UK	✓	
Section 3. Polovant financia		
Relevant financia	activities outside the	submitted work.
of compensation) with entities as desc	ribed in the instructions. Us	nether 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.
Are there any relevant conflicts of inter	rest? ✓ Yes No	
If yes, please fill out the appropriate in	formation below.	
Name of Entity	Giant	n-Financial Other? Comments
Smith & Nephew Orthopaedics UK	Fees? S	Support !

Berryman 2



Section 4. Intellectual Property Patents & Copyrights
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Volume No
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):
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Section 6. Disclosure Statement
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Dr. Berryman reports grants from Smith & Nephew Orthopaedics UK, during the conduct of the study; grants from Smith & Nephew Orthopaedics UK, outside the submitted work; .

Evaluation and Feedback

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

Berryman 3



Instructions

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

Brewer 1



Section 1. Identifying Inform	ation			
1. Given Name (First Name) Paul	2. Surname (Last Name) Brewer	3. Date 12-February-2018		
4. Are you the corresponding author?	✓ Yes No			
5. Manuscript Title British Orthopaedic Trainees' Associatio	n (BOTA) Meeting 2017			
6. Manuscript Identifying Number (if you kn	ow it)			
Section 2. The Work Under Co	onsideration 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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Section 4. Intellectual Proper	ty Patents & Copyrights			
	ned, pending or issued, broadly relevant to the work	?		

Brewer 2



Section 5. Relationships not sovered above
Relationships not covered above
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Dr. Brewer has nothing to disclose.

Evaluation and Feedback

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Brewer 3



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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

Chambers 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fir lain	rst Name)	2. Surname (Last Name) Chambers		3. Date 18-January-2018
4. Are you the cor	responding author?	Yes 🗸 No	Corresponding Author's Nan Zain Sadozai	me
5. Manuscript Title British Orthopae		on (BOTA) Meeting 2017		
6. Manuscript Ider	ntifying Number (if you kr	now it)		
			_	
Section 2.	The Work Under Co	onsideration for Publi	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 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 Vo				
Section 4.	Intellectual Proper	rty Patents & Copyri	ghts	
Do you have any	patents, whether plan	ned, pending or issued, b	roadly relevant to the work?	☐ Yes 🗸 No

Chambers 2



Section 5. Relationships 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):
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Section 6. Disclosure Statement
Disclosure Statement
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Dr. Chambers has nothing to disclose.

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Chambers 3



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

Lewthwaite 1



Section 1. Identifying Inform	•			
Identifying Inform	ation			
1. Given Name (First Name) Simon	2. Surname (Last Name) Lewthwaite	3. Date 23-January-2018		
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Soha Sajid		
5. Manuscript Title				
6. Manuscript Identifying Number (if you know it) British Orthopaedic Trainees' Association (BOTA) Congress 2017				
Section 2. The Work Under Co	onsideration for Public	ation		
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 s	ubmitted 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 Vo				
Section 4. Intellectual Proper	ty Patents & Copyrig	hts		
Do you have any patents, whether plant	ned, pending or issued, br	oadly relevant to the work? Yes V No		

Lewthwaite 2



Section 5. Relationships not covered 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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Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Lewthwaite has nothing to disclose.

Evaluation and Feedback

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

Lewthwaite 3



Instructions

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

Kuiper 1



Section 1. Identifying Inform	nation			
1. Given Name (First Name) Jan Herman	2. Surname (Last Name) Kuiper	3. Date 18-January-2018		
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Soha Sajid		
5. Manuscript TitleSoft Tissue Radiological Knee Index: An soft tissue around the knee using stance6. Manuscript Identifying Number (if you kneed)	lard radiographs	y to produce an index that quantifies the magnitude of		
Section 2. The Work Under C	onsideration for Public	ation		
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 s	ubmitted work.		
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Section 4. Intellectual Prope	rty Patents & Copyrig	hts		
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No		

Kuiper 2



Section 5. Polationships not sovered above	
Relationships not covered above	
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Section 6. Disclosure Statement	
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Dr. Kuiper has nothing to disclose.	

Evaluation and Feedback

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Kuiper 3



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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

Macdonald 1



Continu 1				
Section 1. Identifying Inform	nation			
Given Name (First Name) Deborah	2. Surname (Last Name) Macdonald		3. Date 20-January-2018	
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Leo Brown		
5. Manuscript Title The Survivorship Of The Link Endo-Rotational Hinged Total Knee Arthroplasty: Medium To Long Term Analysis Of 100 Patients 6. Manuscript Identifying Number (if you know it)				
		_		
Section 2. The Work Under Co	onsideration for Public	ation		
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 pressing the "X" button.				
Name of Institution/Company	Grant	n-Financial Other?	Comments	
LINK Orthopaedics			Sponsorship money was given to the department by LINK prior to the start of this study. This was intended for use in PROMS data collection for this patient group. Unfortunately it was instead used elsewhere (not contributing towards the project detailed in this manuscipt)	
Section 3. Relevant financial	activities outside the s	ubmitted work.		
Place a check in the appropriate boxes in of compensation) with entities as describing the "Add +" box. You should repart there any relevant conflicts of interests.	ibed in the instructions. Us port relationships that wer	e one line for each er	ntity; add as many lines as you need by	

Macdonald 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 statem. On occasion, journals may ask authors to disclose further information about reported relationships.	ients.
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. Macdonald reports grants from LINK Orthopaedics, during the conduct of the study; .	

Evaluation and Feedback

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

Macdonald 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.

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

Eskelinen 1



Section 1. Identifying Informa	ation		
1. Given Name (First Name) Antti	2. Surname (Last Name) Eskelinen		3. Date 17-January-2018
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Au Gulraj Matharu	ithor's Name
5. Manuscript Title British Orthopaedic Trainees' Association	(BOTA) Meeting 2017		
6. Manuscript Identifying Number (if you kno	w it)		
Section 2. The Work Under Co	nsideration for Publi	cation	
Did you or your institution at any time receiv any aspect of the submitted work (including k statistical analysis, etc.)? Are there any relevant conflicts of interes	out not limited to grants, da		nment, commercial, private foundation, etc.) for , study design, manuscript preparation,
Section 3. Relevant financial a	ctivities outside the	submitted work.	
	ed in the instructions. Use ort relationships that we transit?	se one line for each	ancial relationships (regardless of amount n entity; add as many lines as you need by the 36 months prior to publication.
Name of Entity	Grant? Personal No.	n-Financial Support?	r? Comments
DePuy			Lecture fees
DePuy	✓		AAOS meeting expenses, including travel and accommodation
DePuy	✓		Co-PI in a study funded by DePuy
Section 4. Intellectual Propert Do you have any patents, whether plants	y Patents & Copyri		he work?

Eskelinen 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. Eskelinen reports personal fees from DePuy, grants from DePuy, grants from DePuy, outside the submitted work; .

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Eskelinen 3



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

Fernandes 1



Section 1.	Identifying Inform	ation		
1. Given Name (First James	t Name)	2. Surname (Last Name) Fernandes		3. Date 12-February-2018
4. Are you the corre	sponding author?	Yes ✓ No	Corresponding Author's Na Paul Brewer	me
5. Manuscript Title British Orthopaedi	ic Trainees' Associatio	n (BOTA) Meeting 2017		
6. Manuscript Identi	ifying Number (if you kn	ow it)		
			_	
Section 2.	The Work Under Co	onsideration for Publi	ication	
any aspect of the sub statistical analysis, et	bmitted work (including	but not limited to grants, d	n a third party (government, co ata monitoring board, study de	mmercial, private foundation, etc.) for esign, manuscript preparation,
Section 3.	Relevant financial a	activities outside the	submitted work.	
of compensation) of clicking the "Add +	with entities as descril	bed in the instructions. Uport relations hips that we	Ise one line for each entity; a	ationships (regardless of amount add as many lines as you need by nonths prior to publication.
Section 4.	Intellectual Proper	ty Patents & Copyri	ghts	
			roadly relevant to the work?	Yes 🗸 No

Fernandes 2



Section 5. Relationships 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):
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Disclosure Statement
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Dr. Fernandes has nothing to disclose.

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Fernandes 3



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

Fowler 1



Section 1.	Identifying Inform	ation	
1. Given Name (First Tim	Name)	2. Surname (Last Name) Fowler	3. Date 23-January-2018
4. Are you the corres	sponding author?	Yes ✓ No	Corresponding Author's Name Mr Jamie O'Callaghan
5. Manuscript Title British Orthopaedi	c Trainees' Associatio	n (BOTA) Meeting 2017	
6. Manuscript Identi	fying Number (if you kn	ow it)	
Section 2.	The Work Under Co	nsideration for Publi	cation
any aspect of the sub statistical analysis, et	omitted work (including	but not limited to grants, d	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Section 3.	Relevant financial a	activities outside the	submitted work.
of compensation) v clicking the "Add +	with entities as descril	oed in the instructions. U ort relationships that we	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 .
Section 4.	ntellectual Proper	ty Patents & Copyri	ghts
			roadly relevant to the work? Yes V No

Fowler 2



Section 5. Relationships not covered above
Relationships not covered above
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Gleeson 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi Robert	rst Name)	2. Surname (Last Name) Gleeson	3. Date 05-February-2018
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Rory Morrison
5. Manuscript Title British Orthopae		on (BOTA) Meeting 2017	
6. Manuscript Ide	ntifying Number (if you kr	now it)	
Section 2.	The Work Under C	onsideration for Public	cation
any aspect of the s statistical analysis,	ubmitted work (including	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ita monitoring board, study design, manuscript preparation,
Section 3.	Relevant financial	activities outside the s	submitted work
of compensation clicking the "Add	the appropriate boxes in with entities as descr	in the table to indicate wh ibed 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 re present during the 36 months prior to publication.
Section 4.	Intellectual Prope	rty Patents & Copyric	ghts
Do you have any	patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No

Gleeson 2



Section 5.	Deletionships 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?				
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Section 6.	Disclosure Statement				
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Dr. Gleeson has r	nothing to disclose.				

Evaluation and Feedback

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Haines 1



Section 1. Identify	ing Information	
1. Given Name (First Name) Samuel	2. Surname (Last Name) Haines	3. Date 18-January-2018
4. Are you the corresponding	author? Yes ✓ No	Corresponding Author's Name
5. Manuscript Title Out of Hours Medical Photo	ography in Trauma & Orthopaedic pra	actice: A Severn Deanery Perspective
6. Manuscript Identifying Num	nber (if you know it)	
Section 2. The Wor	k Under Consideration for Publi	ication
Did you or your institution at a	ny time receive payment or services fron ork (including but not limited to grants, d	n a third party (government, commercial, private foundation, etc.) for lata monitoring board, study design, manuscript preparation,
Section 3. Relevant	t financial activities outside the	submitted work.
of compensation) with entit	ies as described in the instructions. U u should report relationships that we	nether you have financial relationships (regardless of amount Use one line for each entity; add as many lines as you need by ere present during the 36 months prior to publication .
Section 4. Intellect	ual Property Patents & Copyri	ghts
Do you have any patents, w	hether planned, pending or issued, b	proadly relevant to the work? Yes V No

Haines 2



Section 5. Relationships not covered above
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Dr. Haines has nothing to disclose.

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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

ert testimony, employment, or other affiliations patent n-Financial Support: Examples include drugs/equipment

Hujazi 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi	rst Name)	2. Surname (Last Name) Hujazi	3. Date 02-May-2018
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Hannah Sevenoaks
5. Manuscript Title British Orthopae		on (BOTA) Meeting 2017	
6. Manuscript lder	ntifying Number (if you kr	now it)	
			_
Section 2.	The Work Under Co	onsideration for Public	cation
any aspect of the s statistical analysis,	ubmitted work (including	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ita monitoring board, study design, manuscript preparation,
Section 3.	Relevant financial	activities outside the s	submitted work.
of compensation clicking the "Add) with entities as descri	ibed 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 re present during the 36 months prior to publication.
Section 4.	Intellectual Proper	rty Patents & Copyri	ghts
Do you have any	patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No

Hujazi 2



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. Hujazi has nothing to disclose.

Evaluation and Feedback

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

Hujazi 3



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

1 Judge



Section 1. Identifying Information							
1. Given Name (First Name) Andrew	2. Surname (Last Judge	Name)	3. Date 17-January-2018				
4. Are you the corresponding author?	☐ Yes ✓ N	o Correspor Gulraj Ma	ding Author's Name Itharu				
5. Manuscript Title British Orthopaedic Trainees' Association (BOTA) Meeting 2017							
6. Manuscript Identifying Number (if you k	know it)						
Section 2. The Work Under (Consideration fo	r Publication					
Did you or your institution at any time rec any aspect of the submitted work (includin statistical analysis, etc.)? Are there any relevant conflicts of inte	g but not limited to g		•				
Section 3. Relevant financia	l activities outsic	le the submitted	work.				
Place a check in the appropriate boxes of compensation) with entities as desc clicking the "Add +" box. You should re Are there any relevant conflicts of inte If yes, please fill out the appropriate in	ribed in the instructeport relationships rest?	tions. Use one line f	or each entity; add as many lines as	you need by			
Name of Entity	Grant? Persor	Non-Financial Support	Other? Comments				
Anthera Pharmaceuticals, INC.			Consulting services for the E Safety and Monitoring Board				
Servier							
UK Renal Registry							
Oxford Craniofacial Unit	√						
Blood Journal	✓		Statistical reviewer				
Roche-Chugai	✓		Provided sponsorship towar research project.	ds the			
Freshfields Bruckhaus Deringer							

Judge 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. Judge reports personal fees from Anthera Pharmaceuticals, INC., personal fees from Servier, personal fees from UK Renal Registry, grants and personal fees from Oxford Craniofacial Unit, personal fees from Blood Journal, grants from Roche-Chugai, personal fees from Freshfields Bruckhaus Deringer, outside the submitted work; .

Evaluation and Feedback

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Judge 3



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1

Kim



Section 1. Ide	entifying Information				
Given Name (First Name) Min Soo	me) 2. Surn Kim	ame (Last Name)	3. Date 01-February-2018		
4. Are you the correspon	nding author?	No No			
5. Manuscript Title British Orthopaedic Tr	rainees' Association (BOTA) Meeting 2017			
6. Manuscript Identifyin	ng Number (if you know it)				
Section 2. The	· Work Under Consider	ation for Publication			
Did you or your institution	on at any time receive paymo tted work (including but not l	ent or services from a third party (government, coincident) imited to grants, data monitoring board, study defense view No			
Section 3. Relo	evant financial activiti	es 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 Vo					
Section 4. Inte	ellectual Property Pa	tents & Convrights			
		ding or issued, broadly relevant to the work	x?		

Kim 2



Section 5.	
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?
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements rnals may ask authors to disclose further information about reported relationships.
Section 6.	Disclosure Statement
Based on the abo	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Mr. Kim has noth	ning to disclose.

Evaluation and Feedback

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Kim 3



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Lainiala 1



Section 1.	Identifying Inform	nation				
1. Given Name (Fi	rst Name)	2. Surname (Last Name) Lainiala	3. D	Date January-2018		
4. Are you the cor	responding author?	Yes Vo	Corresponding Author's Name Gulraj Matharu			
5. Manuscript Title British Orthopae		on (BOTA) Meeting 2017				
6. Manuscript Ider	ntifying Number (if you kr	now it)				
Section 2.	The Work Under C	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 Volume						
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? Ves No If yes, please fill out the appropriate information below.						
Name of Entity		Grant	on-Financial Other? Comme	nts		
Depuy Synthes			Paid Lectur	re		
Section 4.	Intellectual Proper	rty Patents & Copyr	ights			
Do you have any	patents, whether plan	ned, pending or issued, b	oroadly relevant to the work?	Yes 🗸 No		

Lainiala 2



Section 5. Relationships 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?
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Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Lainiala reports personal fees from Depuy Synthes, outside the submitted work; .

Evaluation and Feedback

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Lainiala 3



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Brown 1



	ı					
Section 1.	Identifying Inform	ation				
1. Given Name (Fi Leo	rst Name)	2. Surname (Last Na Brown	nme)	3. Date 19-January-2018		
4. Are you the cor	responding author?	✓ Yes No				
Patients	Of The Link Endo-Rota		Knee Arthroplasty	r: Medium To	Long Term Analysis Of 100	
6. Manuscript Ide	ntifying Number (if you kn	ow it)				
C 11 2	L					
Section 2.	The Work Under Co	onsideration for l	Publication			
any aspect of the s statistical analysis,	ubmitted work (including	but not limited to gra			commercial, private foundation, etc.) for design, manuscript preparation,	
	out the appropriate info be removed by pressing	•	ou have more thar	one entity pi	ress the "ADD" button to add a row.	
Name of Institut	ion/Company	Grant? Persona	Non-Financial	Other? Co	omments	
LINK Orthopaedics				dep	nsorship money was given to the artment by LINK prior to the start	
		V		use pati	nis study. This was intended for in PROMS data collection for this ent group. Unfortunately it was	
				cont	ead used elsewhere (not tributing towards the project ailed in this manuscipt)	
Section 3. Relevant financial activities outside the submitted work.						
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Brown 2



Section 4.	Late Heat and Donate and Detailed to Committee						
	Intellectual Property Patents & Copyrights						
Do you have any	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. Brown reports grants from LINK Orthopaedics, during the conduct of the study;							

Evaluation and Feedback

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

Brown 3



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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



Section 1. Identifying Inform	ation			
1. Given Name (First Name) Gulraj	2. Surname (Last Name Matharu	·)		3. Date 17-January-2018
4. Are you the corresponding author?	✓ Yes No			
5. Manuscript Title British Orthopaedic Trainees' Association	on (BOTA) Meeting 2017	7		
6. Manuscript Identifying Number (if you kr	now it)			
Section 2. The Work Under Co	onsideration for Puk	olication		
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	but not limited to grants,	, data monitoring	-	•
If yes, please fill out the appropriate info Excess rows can be removed by pressin		nave more than	one enti	ty press the "ADD" button to add a row.
Name of Institution/Company	Grant? Personal Fees?	Non-Financial Support?	Other?	Comments
Arthritis Research UK	V			Awarded an 18 month Clinical Research Fellowship from August 2015 during which time this study was undertaken.
Section 3. Relevant financial	activities outside th	e submitted	work.	
Place a check in the appropriate boxes i of compensation) with entities as descri clicking the "Add +" box. You should rep	bed in the instructions. port relationships that v	. Use one line fo	r each en	itity; add as many lines as you need by
Are there any relevant conflicts of interest)		
If yes, please fill out the appropriate info	ormation below.			
Name of Entity	Grant? Personal Fees?	Non-Financial Support [?]	Other?	Comments
The Royal Orthopaedic Hospital Hip Research and Education Charitable Fund	V			Grant provided for PhD tuition fees and conference travel to present



Name of Entity	Grant?	Personal Fees	Non-Financial Support?	Other?	Comments
The Royal College of Surgeons of England	✓				Salary funded for one-year (August 2014-2015) in the form of a Surgical Research Fellowship for other research work.
The Orthopaedics Trust	✓				Grant provided for PhD tuition fees.
Leigh Day		✓			Undertaken medico-legal work as an advisory expert related to metal-onmetal hip arthroplasties.
Section 4. Intellectual Propert	y Pate	ents & Cop	oyrights		
Do you have any patents, whether plann	ed, pend	ing or issue	ed, broadly releva	nt to the	work? ☐ Yes ✓ No
Section 5. Relationships not c	overed	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/cond	litions/cir	cumstance	s are present (exp	olain belo	w):
No other relationships/conditions/circumstances that present a potential conflict of interest					
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Section 6. Disclosure Statement					
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Dr. Matharu reports grants from Arthritis Research UK, during the conduct of the study; grants from The Royal Orthopaedic Hospital Hip Research and Education Charitable Fund, grants from The Royal College of Surgeons of England, grants from The Orthopaedics Trust, personal fees from Leigh Day, outside the submitted work; .					



Evaluation and Feedback

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1

McConnell



Section 1.	Identifying Inform	nation				
1. Given Name (Fi Jamie	ven Name (First Name) 2. Surname (Last Name) e McConnell		3. Date 17-January-2018			
4. Are you the corresponding author? Yes Volume No		☐ Yes ✓ No	Corresponding Author's Name Gulraj Matharu			
5. Manuscript Title British Orthopae		on (BOTA) Meeting 2017				
6. Manuscript Ide	ntifying Number (if you kr	now 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						
Section 3.	Polovant financial	activities outside the	upmitted 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 Vo						
Section 4.	Intellectual Proper	rty Patents & Copyric	ghts			
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo						

McConnell 2



Section 5.	
Section 5.	Relationships not covered above
	ationships or activities that readers could perceive to have influenced, or that give the appearance of cing, what you wrote in the submitted work?
✓ Yes, the follow	ing relationships/conditions/circumstances are present (explain below):
No other relation	onships/conditions/circumstances that present a potential conflict of interest
The hospital where	e I work receives funding from DePuy to support my fellowship. I do not directly benefit
	uscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements als may ask authors to disclose further information about reported relationships.
Section 6.	Disclosure Statement
Based on the abov below.	e disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. McConnell rep directly benefit.	orts and The hospital where I work receives funding from DePuy to support my fellowship. I do not

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

McLauchlan 1



Section 1.	Identifying Inform	nation			
Given Name (First Name) George		2. Surname (Last Name) McLauchlan	3. Date 02-February-2018		
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Min Soo Kim		
5. Manuscript Title British Orthopae		on (BOTA) Meeting 2017			
6. Manuscript Ide	ntifying Number (if you kr	now 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					
Section 3.	Relevant financial	activities outside the s	submitted work.		
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Section 4.	Intellectual Prope	rty Patents & Copyric	ghts		
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No		

McLauchlan 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):
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Dr. McLauchlan has nothing to disclose.

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Mehta 1



Section 1.	Identifying Inform	nation			
		2. Surname (Last Name) Mehta	3. Date 18-January-2018		
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name H. Sevenoakes		
5. Manuscript Title British Orthopae		on (BOTA) Meeting 2017			
6. Manuscript lder	ntifying Number (if you kr	now it)			
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Section 4.	Intellectual Prope	rty Patents & Copyric	ghts		
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No		

Mehta 2



Section 5. Relationships not covered above
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Muir 1



Section 1.	Identifying Inform	nation			
Given Name (First Name) Ross		2. Surname (Last Name) Muir		3. Date 18-January-2018	
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Nam Zain Sadozai	e	
5. Manuscript Title British Orthopae		on (BOTA) Meeting 2017			
6. Manuscript Ider	ntifying Number (if you kr	now it)			
			_		
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Section 4.	Intellectual Proper	rty Patents & Copyri	ghts		
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work?	☐ Yes ✓ No	

Muir 2



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patent



Section 1. Identifying Information								
1. Given Name (First Name) David	2. Surname (La Murray	st Name)	3. Date 17-January-	2018				
4. Are you the corresponding author?	Yes ✓	No Correspo Gulraj M	nding Author's Name atharu					
5. Manuscript Title British Orthopaedic Trainees' Associa								
6. Manuscript Identifying Number (if you	know it)							
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any aspect of the submitted work (includi statistical analysis, etc.)? Are there any relevant conflicts of inte	_	o grants, data monitori	ng board, study design, manuscr	ipt preparation,				
Section 3. Relevant financia	al activities out	side the submitted	d work.					
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Name of Entity	Grant? Pers	onal Non-Financia es? Support?	Other? Comments					
Zimmer Biomet	✓		Research funds paid	to institution				
Zimmer Biomet			Receives royalties re unicompartmental k replacement.					
			Paid travel, accomm expenses for attend meetings.					
			Paid consultant / lec	turer				



Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments	
Stryker	√				Research funds for studies looking at Exeter hip replacements & periprosthetic fractures	
Section 4. Intellectual Propert	y Pate	ents & Co	pyrights			
Do you have any patents, whether plann	ed, pend	ing or issue	ed, broadly releva	nt to the	work? Yes 🗸 No	
Section 5. Relationships not c	overed	above				
Are there other relationships or activities potentially influencing, what you wrote i				nfluence	d, or that give the appearance of	
Yes, the following relationships/cond	itions/cir	cumstance	es are present (exp	olain belo	ow):	
✓ No other relationships/conditions/cir	cumstan	ces that pro	esent a potential o	conflict o	finterest	
At the time of manuscript acceptance, jo On occasion, journals may ask authors to						nents.
Section 6. Disclosure Stateme	nt					
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Dr. Murray reports grants from Zimmer Biomet, personal fees from Zimmer Biomet, grants from Stryker, outside the submitted work; .						



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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

Clement 1



Section 1. Identifying Inform					
Identifying Inform	nation				
Given Name (First Name) Nicholas	2. Surname (Last Name) Clement		3. Date 20-January-2018		
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Leo Brown			
5. Manuscript TitleThe Survivorship Of The Link Endo-RotaPatients6. Manuscript Identifying Number (if you known)	-	Arthroplasty: Medium T	o Long Term Analysis Of 100		
		-			
Section 2. The Work Under Co	onsideration for Public	ation			
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 intered If yes, please fill out the appropriate info Excess rows can be removed by pressing	y but not limited to grants, da est? Yes No ormation below. If you hav	ta monitoring board, stud	ly design, manuscript preparation,		
Name of Institution/Company	Grant•	n-Financial Other?	Comments		
LINK Orthopaedics		di of us pa in cc	ponsorship money was given to the epartment by LINK prior to the start of this study. This was intended for se in PROMS data collection for this atient group. Unfortunately it was estead used elsewhere (not contributing towards the project etailed in this manuscipt)		
Section 3. Relevant financial	activities outside the s	ubmitted 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 Vo					

Clement 2



Section 4. Intellectual Property Patents & Copyrights	
Do you have any patents, whether planned, pending or issued, broadly relevant to	o the work?
Section 5. Relationships not covered above	
Are there other relationships or activities that readers could perceive to have influence potentially influencing, what you wrote in the submitted work?	enced, or that give the appearance of
Yes, the following relationships/conditions/circumstances are present (explain	below):
No other relationships/conditions/circumstances that present a potential conf	lict of interest
At the time of manuscript acceptance, journals will ask authors to confirm and, if n On occasion, journals may ask authors to disclose further information about repor	
Section 6. Disclosure Statement	
Based on the above disclosures, this form will automatically generate a disclosure below.	statement, which will appear in the box
Dr. Clement reports grants from LINK Orthopaedics, during the conduct of the stu	ıdy; .

Evaluation and Feedback

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Clement 3



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O'Callaghan 1



Section 1.	Identifying Information					
1. Given Name (First Name) Jamie		Surname (Last Name) O'Callaghan		3. Date 17-January-2018		
4. Are you the cor	responding author?	✓ Yes	No			
5. Manuscript Title British Orthopae	e dic Trainees' Associatio	n (BOTA) M	Meeting 2017			
6. Manuscript Idei	ntifying Number (if you kn	ow it)				
Section 2.	The Work Under Co	onsiderati	ion for Publication	l.		
any aspect of the s statistical analysis,	stitution at any time recei ubmitted work (including	ve payment but not limit	or services from a third party (government, coited to grants, data monitoring board, study of es very No			
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 Vo						
Section 4.	Intellectual Proper	tv Pater	nts & Copyrights			
Do you have any		<u> </u>	ng or issued, broadly relevant to the worl	k? ☐ Yes 🗸 No		

O'Callaghan 2



Section 5. Relationships not covered above
helationships 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?
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Dr. O'Callaghan has nothing to disclose.

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O'Callaghan 3



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

Pandit 1



	1				
Section 1.	Identifying Inform	mation			
1. Given Name (First Name) 2. Surname (Last Name) Hemant Pandit		l	3. Date 17-January-2018		
4. Are you the cor	responding author?	Yes No Corresponding Author's Name Gulraj Matharu		ithor's Name	
5. Manuscript Title British Orthopaedic Trainees' Association (BOTA) Meeting 2017					
6. Manuscript Idei	ntifying Number (if you k	now it)			
Section 2.			D		
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 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					
•				nentity; add as many lines as you nee the 36 months prior to publicatior	-
Are there any rel	evant conflicts of inte	rest? 🗸 Yes 🗌 No)		
If yes, please fill o	out the appropriate in	formation below.			
Name of Entity		Grant? Personal N	Ion-Financial Othe	r? Comments	
Zimmer Biomet		✓		Research funds paid to institution	
Zimmer Biomet				Paid consultant / lecturer	
Zimmer Biomet				Paid travel, accommodation, expenses for attending courses and	

Pandit 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						
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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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. Pandit reports grants from Zimmer Biomet, personal fees from Zimmer Biomet, personal fees from Zimmer Biomet, outside the submitted work; .						

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Parwaiz 1



Section 1.	Identifying Inform	nation				
1. Given Name (Fi Hammad	rst Name)	2. Surname (Last Name) Parwaiz	3. Date 18-January-2018			
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Jamie O'Callaghan			
5. Manuscript Title British Orthopae		on (BOTA) Meeting 2017				
6. Manuscript Ide	ntifying Number (if you kr	now it)				
			-			
Section 2. The Work Under Consideration for Publication						
any aspect of the s statistical analysis,	ubmitted work (including	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,			
	ı					
Section 3.	Relevant financial	activities outside the s	submitted work.			
of compensation clicking the "Add	n) with entities as descri	ibed 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 re present during the 36 months prior to publication.			
Section 4.	Intellectual Proper	rty Patents & Copyrig	ghts			
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No			

Parwaiz 2



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):
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Reito 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fii Aleksi	rst Name)	2. Surname (Last Name) Reito		3. Date 17-January-2018
4. Are you the cor	responding author?	Yes 🗸 No	Corresponding Author's Nam Gulraj Matharu	ne
5. Manuscript Title British Orthopae		on (BOTA) Meeting 2017		
6. Manuscript Ider	ntifying Number (if you kr	now it)		
			_	
Section 2.	The Work Under Co	onsideration for Publi	cation	
any aspect of the s statistical analysis,	ubmitted work (including	but not limited to grants, do	a third party (government, com ata monitoring board, study desi	nmercial, private foundation, etc.) for ign, manuscript preparation,
Section 3.	Relevant financial	activities outside the	submitted work.	
of compensation clicking the "Add) with entities as descri	ibed in the instructions. U port relationships that we		tionships (regardless of amount ld as many lines as you need by onths prior to publication.
Section 4.	Intellectual Proper	rty Patents & Copyri	ghts	
Do you have any	patents, whether plan	ned, pending or issued, b	roadly relevant to the work?	Yes ✓ No

Reito 2



Section 5. Polationships not sovered above
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Dr. Reito has nothing to disclose.

Evaluation and Feedback

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Reito 3



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

Sadozai 1



Section 1.	Identifying Inform	nation			
1. Given Name (Fi	en Name (First Name)		Name)	3. Date 18-Janua	ary-2018
4. Are you the cor	responding author?	✓ Yes 1	No		
5. Manuscript Title British Orthopae	e dic Trainees' Associatio	on (BOTA) Meetin	g 2017		
6. Manuscript Ider	ntifying Number (if you kr	now it)			
Section 2.	The Work Under C	onsideration fo	or Publication		
any aspect of the s statistical analysis,	stitution at any time rece ubmitted work (including	ive payment or serves but not limited to	vices from a third party (gover grants, data monitoring board		
Section 3.	Relevant financial	activities outsi	de the submitted work	ζ.	
of compensation clicking the "Add	n) with entities as descri	ibed in the instru- port relationships	icate whether you have finctions. Use one line for eacthat were present during No	h entity; add as mar	ny lines as you need by
Section 4.	Intellectual Proper	rtv Patents &	Copyrights		
Do you have any			ssued, broadly relevant to	the work? Yes	✓ No

Sadozai 2



Section 5. Relationships not covered above
helationships 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?
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Section 6. Disclosure Statement
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Dr. Sadozai has nothing to disclose.

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Sadozai 3



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

Sajid 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi Soha	rst Name)	2. Surname (Last Name) Sajid		3. Date 17-August-2018
4. Are you the cor	responding author?	✓ Yes No		
5. Manuscript Title British Orthopae		on (BOTA) Meeting 2017		
6. Manuscript Ide	ntifying Number (if you kr	now it)		
			_	
Section 2.	The Work Under C	onsideration for Public	ation	
any aspect of the s statistical analysis,	stitution at any time rece submitted work (including	ive payment or services from g but not limited to grants, da	a third party (government, coi	mmercial, private foundation, etc.) for esign, manuscript preparation,
Section 3.	Relevant financial	activities outside the s	ubmitted work.	
of compensation clicking the "Add	n) with entities as descr	ibed in the instructions. Us port relationships that wer	e one line for each entity; a	ationships (regardless of amount add as many lines as you need by nonths prior to publication.
Section 4.	Intellectual Prope	rty Patents & Copyric	ıhts	
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work?	? Yes 🗸 No

Sajid 2



Section 5. Relationships 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):
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Dr. Sajid has nothing to disclose.

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Sajid 3



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

Sergeant 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fii Jamie	rst Name)	2. Surname (Last Name) Sergeant	3. Date 05-February-2018
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Hannah Sevenoaks
5. Manuscript Title British Orthopae		on (BOTA) Meeting 2017	
6. Manuscript Ider	ntifying Number (if you kr	now it)	
			_
Section 2.	The Work Under Co	onsideration for Public	cation
any aspect of the s statistical analysis,	ubmitted work (including	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Section 3.	Relevant financial	activities outside the	submitted work.
of compensation clicking the "Add	the appropriate boxes i) with entities as descri	in the table to indicate wh ibed in the instructions. Us port relationships that we	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.
Section 4.	Intellectual Proper	rty Patents & Copyri	ghts
Do you have any	patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No

Sergeant 2



Section 5. Relationships not sovered above
Relationships not covered above
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earning royalties or not **Royalties:** Funds are coming in to you or your institution due to your

patent

Sevenoaks 1



Section 1. Identif	ying Information			
1. Given Name (First Name) Hannah	2. Surname (La Sevenoaks	ast Name)	3. Date 18-January-2018	
4. Are you the corresponding	g author?	No		
5. Manuscript Title British Orthopaedic Traine	ees' Association (BOTA) Meeti	ing 2017		
6. Manuscript Identifying Nu	mber (if you know it)			
Section 2. The Wo	ork Under Consideration	for Publication		
Did you or your institution at	any time receive payment or so work (including but not limited t	ervices from a third party (governm	nent, commercial, private foundation, etc.) for tudy design, manuscript preparation,	
Section 3. Relevan	nt financial activities out	side the submitted work.		
of compensation) with ent	ities as described in the instr ou should report relationshi	ructions. Use one line for each e	cial relationships (regardless of amount ntity; add as many lines as you need by le 36 months prior to publication.	
Section 4. Intellec	tual Property Patents	& Convrights		
			e work?	
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes V				

Sevenoaks 2



Section 5. Relationships not covered above
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Sevenoaks 3



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Breusch 1



Section 1. Identifying Inform				
Identifying Infor	mation			
Given Name (First Name) Steffen	2. Surname (Last Name) Breusch	3. Date 20-January-2018		
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Leo Brown		
5. Manuscript Title The Survivorship Of The Link Endo-Rotational Hinged Total Knee Arthroplasty: Medium To Long Term Analysis Of 100 Patients 6. Manuscript Identifying Number (if you know it)				
		_		
Section 2. The Work Under (Consideration for Publi	cation		
any aspect of the submitted work (includir statistical analysis, etc.)? Are there any relevant conflicts of inte	ng but not limited to grants, do rest? Yes No formation below. If you have	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation, we more than one entity press the "ADD" button to add a row.		
Name of Institution/Company	Grant	on-Financial Other? Comments		
.INK Orthopaedics		Sponsorship money was given to the department by LINK prior to the start of this study. This was intended for use in PROMS data collection for this patient group. Unfortunately it was instead used elsewhere (not contributing towards the project detailed in this manuscipt)		
Section 3. Polovant financia	l activities outside the	on boundational consults		
Relevant financia	i activities outside the	submitted work.		
of compensation) with entities as desc	ribed in the instructions. U eport relationships that we	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.		

Breusch 2



Soutien A
Section 4. Intellectual Property Patents & Copyrights
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo
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Dr. Breusch reports grants from LINK Orthopaedics, during the conduct of the study; .

Evaluation and Feedback

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Breusch 3



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Ward 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi	rst Name)	2. Surname (Last Name) Ward	3. Date	
4. Are you the cor	responding author?	Yes No		
5. Manuscript Title British Orthopae		on (BOTA) Meeting 2017		
6. Manuscript Ider	ntifying Number (if you kr	now it)		
Section 2.	The Work Under C	onsideration for Publication	on and the second of the secon	
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 subm	nitted 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 Vo				
Section 4.	Intellectual Prope	rty Patents & Copyrights		
Do you have any	patents, whether plan	ned, pending or issued, broadly	y relevant to the work?	

Ward 2



Section 5.					
R	elationships not covered above				
	tionships or activities that readers could perceive to have influenced, or that give the appearance of ing, what you wrote in the submitted work?				
Yes, the following	Yes, the following relationships/conditions/circumstances are present (explain below):				
✓ No other relatio	nships/conditions/circumstances that present a potential conflict of interest				
	iscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements Ils may ask authors to disclose further information about reported relationships.				
Section 6. D	isclosure Statement				
Based on the above below.	disclosures, this form will automatically generate a disclosure statement, which will appear in the box				
Dr. Ward has nothin	ng to disclose.				

Evaluation and Feedback

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Ward 3



Instructions

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4. Intellectual Property.

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Relationships not covered above.

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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

Woodruff 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi Michael	rst Name)	Surname (Last Name) Woodruff	3. Date 19-January-2018
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name
5. Manuscript Title British Orthopae		n (BOTA) Meeting 2017	
6. Manuscript Ider	ntifying Number (if you kr	now it)	
Section 2.	The Work Under Co	onsideration for Public	cation
any aspect of the s statistical analysis,	stitution at any time rece ubmitted work (including	ive payment or services from but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Section 3.	Relevant financial	activities outside the s	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 Vo			
Section 4.	Intellectual Prope	rty Patents & Copyri	ghts
Do you have any	patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No

Woodruff 2



Section 5. Relationships not covered 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. Woodruff has nothing to disclose.

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Woodruff 3



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

Young 1



Section 1.	Identifying Inform	ation		
1. Given Name (First Stephen	t Name)	2. Surname (Last Name) Young	-	. Date 7-January-2018
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Gulraj Matharu	
5. Manuscript Title British Orthopaedi	ic Trainees' Associatio	n (BOTA) Meeting 2017		
6. Manuscript Identi	ifying Number (if you kn	ow it)		
			_	
Section 2.	The Work Under Co	onsideration for Publi	cation	
any aspect of the sub statistical analysis, et	omitted work (including	but not limited to grants, da	a third party (government, comn ita monitoring board, study desig	nercial, private foundation, etc.) for gn, manuscript preparation,
Section 3.	Relevant financial a	activities outside the :	submitted work.	
of compensation) of clicking the "Add +	with entities as descri	bed in the instructions. Use port relationships that we		onships (regardless of amount d as many lines as you need by nths prior to publication .
Section 4.	ntellectual Proper	ty Patents & Copyri	ghts	
Do you have any p	patents, whether plann	ned, pending or issued, b	roadly relevant to the work? [Yes ✓ No

Young 2



Section 5.	
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?
✓ Yes, the follow	wing relationships/conditions/circumstances are present (explain below):
No other rela	tionships/conditions/circumstances that present a potential conflict of interest
I receive paymen	its for lectures given by me about DePuy total hip replacements
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements rnals may ask authors to disclose further information about reported relationships.
Section 6.	Disclosure Statement
Based on the abo	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Young report	ts and I receive payments for lectures given by me about DePuy total hip replacements.

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Young 3



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

Sangster 1



Section 1. Identify	ring Information				
Given Name (First Name) Marshall	2. Surname (Last Name) Sangster	3. Date 31-January-2018			
4. Are you the corresponding	author? Yes 🗸 No	Corresponding Author's Name Jamie O'Callaghan			
5. Manuscript Title British Orthopaedic Trainee	es' Association (BOTA) Meeting 2017				
6. Manuscript Identifying Nun	nber (if you know it)				
Section 2. The Wor	k Under Consideration for Publi	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 No					
Section 3. Relevan	t financial activities outside the	submitted work.			
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Section 4. Intellect	ual Property Patents & Copyri	ghts			
Do you have any patents, w	hether planned, pending or issued, b	oroadly relevant to the work?			

Sangster 2



Section 5. Polationships not sovered above				
Relationships not covered above				
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Section 6. Disclosure Statement				
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Dr. Sangster has nothing to disclose.				

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

1

administrative support, etc.



Section 1.	Identifying Inform	nation			
1. Given Name (Fii Thomas	rst Name)	2. Surname (Last Name) Fleming	3. Date 01-February-2018		
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Jamie O'Callaghan		
5. Manuscript Title Out of Hours Medical Photography in Trauma & Orthopaedic practice: A Severn Deanery Perspective					
6. Manuscript Ider	ntifying Number (if you kr	now it)			
Section 2.	The Work Under Co	onsideration for Publi	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 No					
Section 3.	Relevant financial	activities outside the	submitted work.		
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Section 4.	Intellectual Proper	rty Patents & Copyri	ghts		
Do you have any	patents, whether plan	ned, pending or issued, b	oroadly relevant to the work? Yes V No		

Fleming 2



Section 5.			
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Cartinuc			
Section 6.	Disclosure Statement		
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Dr. Fleming has	nothing to disclose.		

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Fleming 3