

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.

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

Daly 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi Thomas	, ,	2. Surname (Last Name) Daly	3. Date
4. Are you the cor	responding author?	☐ Yes ✓ No	Corresponding Author's Name Joseph P. Iannotti, MD, PhD
5. Manuscript Title Synovial Fluid In		or of Periprosthetic Shoul	der Infection
6. Manuscript Idei	ntifying Number (if you kr	now it)	
Section 2.	The Work Under C	onsideration for Publi	cation
any aspect of the s statistical analysis,	submitted work (including etc.)?	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Are there any rei	evant conflicts of intere	est? Yes ✓ No	
Section 3.	Relevant financial	activities outside the	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 we	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.
Section 4.	Intellectual Prope	rty Patents & Copyri	ghts
Do you have any	patents, whether plan	ned, pending or issued, b	roadly relevant to the work? Yes V No

Daly 2



Section 5. Relationships not covered above
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Section 6. Disclosure Statement
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Dr. Daly has nothing to disclose.

Evaluation and Feedback

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Daly 3



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patent

Farias Kovac 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Mario	2. Surname (Last Name) Farias Kovac	3. Date 06-January-2014
4. Are you the corresponding author? Yes ✓ No		Corresponding Author's Name Joseph P. Iannotti, MD, PhD
5. Manuscript Title Synovial Fluid Interleukin-6 as a Predic	tor of Periprosthetic Should	der Infection
6. Manuscript Identifying Number (if you k	now it)	
Section 2. The Work Under C	Consideration for Public	cation
	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.
Place a check in the appropriate boxes of compensation) with entities as descr	in the table to indicate wh ribed in the instructions. Us 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.
Section 4. Intellectual Prope	Determine Committee	ulaa.
Intellectual Prope	rty Patents & Copyric	gnts ———
Do you have any patents, whether plan	nned, pending or issued, br	roadly relevant to the work? Yes V No

Farias Kovac 2



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

Frangiamore 1



Section 1. Identifying Inform	nation	
Given Name (First Name) Salvatore	2. Surname (Last Name) Frangiamore	3. Date 12-January-2014
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Joseph P. Iannotti, MD, PhD
5. Manuscript Title Synovial Fluid Interleukin-6 as a Predict	or of Periprosthetic Should	ler Infection
6. Manuscript Identifying Number (if you k	now it)	
Section 2. The Work Under C	onsideration for Public	ation
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Do you have any patents, whether plan	ned, pending or issued, bro	oadly relevant to the work? Yes V No

Frangiamore 2



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Grosso 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi Matthew	rst Name)	2. Surname (Last Name) Grosso	3. Date 06-January-2014
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Joseph P. Iannotti, MD, PhD
5. Manuscript Title Synovial Fluid In		or of Periprosthetic Should	der Infection
6. Manuscript Ider	ntifying Number (if you kr	now it)	
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Do you have any	patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No

Grosso 2



Section 5.	Deletionshing not governed above
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I have IP and Cor software related	nsulting relationships with the following companies related to shoulder implants, instrumentation or to arthroplasty:
Zimmer, DePuy-	Synthes, Biomet, Integra, Custom Orthopaedic Solutions
	nsulting relationships for graft and scaffold devices for soft tissue repair with: Transplant Foundation and Tornier.
I receive royalties	s as an editor for publications from Elsevier and Lippincott publishers.
I also receive cor	npensation from the ASES for Chairing the Board for Journal Shoulder and Elbow
None of these co	inflicts are related to the subject matter of the submitted publication.
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Dr. lannotti reports and I have IP and Consulting relationships with the following companies related to shoulder implants, instrumentation or software related to arthroplasty:

Zimmer, DePuy-Synthes, Biomet, Integra, Custom Orthopaedic Solutions

I have IP and Consulting relationships for graft and scaffold devices for soft tissue repair with: Musculoskeletal Transplant Foundation and Tornier.

I receive royalties as an editor for publications from Elsevier and Lippincott publishers.

I also receive compensation from the ASES for Chairing the Board for Journal Shoulder and Elbow

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Ricchetti 1



Section 1.	Identifying Inform	nation			
1. Given Name (Fi	rst Name)	2. Surname (Last Name) Ricchetti		3. Date 07-January-2014	
4. Are you the cor	responding author?	Yes Vo	Corresponding Authors Joseph P. lannotti,		
5. Manuscript Title Synovial Fluid In		or of Periprosthetic Shou	ılder Infection		
6. Manuscript Ider	ntifying Number (if you kn	now it)			
Section 2.	The Work Under Co	onsideration for Publ	ication		
any aspect of the s statistical analysis,	ubmitted work (including	but not limited to grants, o		ent, commercial, private foundation, etc.) foudy design, manuscript preparation,	or
Section 3.	Relevant financial	activities outside the	submitted work.		
of compensation) with entities as descri	bed in the instructions. I	Jse one line for each e	cial relationships (regardless of amount ntity; add as many lines as you need by e 36 months prior to publication.	
	evant conflicts of intere				
If yes, please fill o	out the appropriate info	ormation below.			
Name of Entity		Grant	on-Financial Support? Other?	Comments	
		V		Depuy JJ grant for outcomes in reverse total shoulder arthroplasty	
Section 4.	Intellectual Proper	ty Patents & Copyr	ights		
Do you have any	patents, whether plani	ned, pending or issued, k	proadly relevant to the	work? ☐ Yes ✓ No	

Ricchetti 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?
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✓ 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. Ricchetti reports grants from null, outside the submitted work; .

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Ricchetti 3



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3. Relevant financial activities outside the submitted work.

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

Saleh 1



Section 1.	Identifying Inform	nation				
Given Name (First Name) Anas		2. Surname (Last Name) Saleh	3. Date 06-January-2014			
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Joseph P. Iannotti, MD, PhD			
5. Manuscript Title Synovial Fluid Interleukin-6 as a Predictor o		or of Periprosthetic Should	der Infection			
6. Manuscript Identifying Number (if you know it)						
Section 2.	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 Vo						
Section 3.	Delevent finencial		المرابعة عمل المرابعة			
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						

Saleh 2



Section 5. Relationships not severed above			
Relationships not covered above			
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Section 6. Disclosure Statement			
Disclosure Statement			
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Dr. Saleh has nothing to disclose.			

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Saleh 3



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

Zhang 1



Section 1.	Identifying Inform	nation			
1. Given Name (First Name) Xiaochun		2. Surname (Last Name) Zhang	3. Date 16-January-2014		
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Joseph P. Iannotti, MD, PhD		
5. Manuscript Title Synovial Fluid Interleukin-6 as a Predicto		or of Periprosthetic Should	der Infection		
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 Vo					
	ı				
Section 3.	Relevant financial	activities outside the s	submitted work.		
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	l				
Section 4.	Intellectual Proper	ty Patents & Copyri	ghts		
Do you have any	patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No		

Zhang 2



Section 5. Polationships not severed above			
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patent

Bauer 1



Section 1.	Identifying Inform	nation			
1. Given Name (First Name) Thomas		2. Surname (Last Nam Bauer	3. Date 25-August-2014		
4. Are you the corresponding author?		☐ Yes ✓ No	Corresponding Author's Name Iannotti, J		
5. Manuscript Title Synovial fluid interleukin-6y as a predictor of periprosthetic shoulder infection					
6. Manuscript Identifying Number (if you know it)					
Section 2.	The Work Under Co	onsideration for Pu	ıblication		
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 t	he submitted work.		
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ii yes, piease iiii c	out the appropriate into	ormation below.			
Name of Entity		Grant? Personal Fees?	Non-Financial Other? Comments		
Stryker Orthopaedics			Consultant		
Smith & Nephew Orth	nopaedics		Consultant		
3io2		✓	Consultant		
Section 4.	Intellectual Proper	rty Patents & Cop	yrights		
Do you have any	patents, whether plan	ned, pending or issued	d, broadly relevant to the work? Yes V No		

Bauer 2



Section 5.				
Jeetion 3.	Relationships not covered above			
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below.	ove disclosures, this form will determine box			
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