

#### 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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### 4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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| I.Given Name (First Name)<br>Hue                             | 2. Surname (Last Name)<br>Luu             | 3. Date<br>11-November-2017 |
|--|---|-----------------------------|
| Are you the corresponding author?                            | ✓ Yes No                                  |                             |
| 5. Manuscript Title<br>Pre-operative opioid use correlates v | with higher readmission and revision rate | ; in TKA and THA natients   |
| •  | with higher readmission and revision rate | s in TKA and THA patients   |

# Did you or your institution **at any time** receive payment or services from a third party (government, commercia

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? | $\checkmark$ | 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 | 1. |
|---|----|
| Excess rows can be removed by pressing the "X" button.  |    |

| Name of Institution/Company                          | Grant? | Personal<br>Fees? | Non-Financial<br>Support <mark>?</mark> | Other?       | Comments |  |
|--|--------|-------------------|---|--------------|----------|--|
| Kovler Family Foundation and Barnett Family<br>Trust |        |                   |   | $\checkmark$ |          |  |

#### Section 3.

Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest?  $\Box$  Yes  $\checkmark$  No

# Section 4. Intellectual Property -- Patents & Copyrights

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



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Dr. Luu reports other from Kovler Family Foundation and Barnett Family Trust, during the conduct of the study.

#### **Evaluation and Feedback**



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| Section 1. Identifying Inform   | nation  |   |                            |
|---|---|---|----------------------------|
|   |   |   |                            |
| 1. Given Name (First Name)<br>Douglas   | 2. Surname (Last Name)<br>Dirschl                               |   | 3. Date<br>08-January-2018 |
| 4. Are you the corresponding author?  | Yes 🖌 No  | Corresponding Author's Nai<br>Hue Luu, MD | me                         |
| 5. Manuscript Title<br>Pre-operative opioid use correlates wit  | h higher readmission and  | revision rates in TKA and TH              | IA patients                |
| 6. Manuscript Identifying Number (if you ki<br>JBJS-S-17-01910  | now it)   |   |                            |
|   |   | _   |                            |
| Section 2. The Work Under C   | onsideration for Publi  | cation                                    |                            |
| Did you or your institution <b>at any time</b> rece<br>any aspect of the submitted work (including<br>statistical analysis, etc.)?<br>Are there any relevant conflicts of inter | ive payment or services from<br>g but not limited to grants, da | a third party (government, co             |                            |

# Section 3. Relevant financial activities outside the submitted work.

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| Are there any relevant conflicts of interest? | Y | es 🗸 | 1 | No |
|---|---|------|---|----|
|---|---|------|---|----|

# Section 4. Intellectual Property -- Patents & Copyrights

| Do you have any patents, whether planned, pending or issued, broadly relevant to the wor | ? | Yes | 🖌 🗸 📈 | 0 |
|--|---|-----|-------|---|
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Dr. Dirschl has nothing to disclose.

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| Section 1. Ide   | ntifying Information                  |   |
|--|---------------------------------------|---|
| 1. Given Name (First Nar<br>Harpreet                   | me) 2. Surname (Last M<br>Bawa        | Name) 3. Date 28-November-2014                              |
| 4. Are you the correspor                               | nding author? Yes 🖌 No                | Corresponding Author's Name<br>Hue H Luu                    |
| 5. Manuscript Title<br>Anti-Osteoporosis The<br>Sample | erapy After Fragility Fracture Lowers | Rate of Subsequent Fracture: Analysis of a Large Population |
| 6. Manuscript Identifying                              | g Number (if you know it)             |   |

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Are there any relevant conflicts of interest? Yes

| $\checkmark$ | NO |  |
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| Continued  |                                   |  |
|--|-----------------------------------|--|
| Section 1. Identifying Info                                | ormation                          |  |
| 1. Given Name (First Name)<br>Jack                         | 2. Surname (Last Name)<br>Weick   | 3. Date<br>12-November-2017  |
| 4. Are you the corresponding author?                       | Yes 🖌 No                          | Corresponding Author's Name<br>Hue Luu   |
| 5. Manuscript Title<br>Pre-operative opioid use correlates | with higher readmission and       | revision rates in TKA and THA patients   |
| 6. Manuscript Identifying Number (if yo<br>JBJS-S-17-01910 | u know it)                        |  |
|  |                                   |  |
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