

#### **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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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

Nystrom 1



Section 1.	Identifying Inforn	nation		
1. Given Name (Fi Lukas	rst Name)	2. Surname (Last Name) Nystrom	3. Date 05-February-2014	
4. Are you the cor	responding author?	✓ Yes No		
5. Manuscript Title Prospective Eval		zation Prior to Referral of Musculosk	eletal Tumors	
6. Manuscript Ide	ntifying Number (if you kı	now it)		
Section 2.	The Work Under C	onsideration for Publication		
any aspect of the s statistical analysis,	submitted work (including	g but not limited to grants, data monitor	ty (government, commercial, private foundation, etc.) for ing board, study design, manuscript preparation,	
Section 3.	Relevant financial	activities outside the submitte	d work.	
of compensation clicking the "Add	the appropriate boxes n) with entities as descr	in the table to indicate whether you ibed in the instructions. Use one line port relationships that were <b>presen</b>	have financial relationships (regardless of amount e for each entity; add as many lines as you need by t during the 36 months prior to publication.	
Section 4.	Intellectual Prope	rty Patents & Copyrights		
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo				

Nystrom 2



Section 5. Relationships not covered above
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Yes, the following relationships/conditions/circumstances are present (explain below):
✓ No other relationships/conditions/circumstances that present a potential conflict of interest
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements On occasion, journals may ask authors to disclose further information about reported relationships.
Section 6. Disclosure Statement
Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Nystrom has nothing to disclose.

#### **Evaluation and Feedback**

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Nystrom 3



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Scarborough 1



Section 1. Identifying Inform	mation	
1. Given Name (First Name) Mark	2. Surname (Last Name) Scarborough	3. Date 05-February-2014
4. Are you the corresponding author?	☐ Yes   ✓ No	Corresponding Author's Name Lukas M. Nystrom
5. Manuscript Title Prospective Evaluation of Imaging Util	ization Prior to Referral of N	1 usculoskeletal Tumors
6. Manuscript Identifying Number (if you k	now it)	
		-
Section 2. The Work Under C	Consideration for Public	ation
	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,
Section 2		
Section 3. Relevant financial	l activities outside the s	ubmitted work.
of compensation) with entities as desc	ribed in the instructions. Us eport relationships that wer	ether you have financial relationships (regardless of amount to one line for each entity; add as many lines as you need by e present during the 36 months prior to publication.
If yes, please fill out the appropriate inf	formation below.	
Name of Entity	Grant? Personal Nor	o-Financial Other? Comments
Exactech	✓	Consultant
Section 4. Intellectual Prope	erty Patents & Copyrig	hts
Do you have any patents, whether plan	nned, pending or issued, br	oadly relevant to the work? ☐ Yes ✓ No

Scarborough 2



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Reimer 1



Section 1.	Identifying Inform	nation		
Given Name (First Name) Nickolas		2. Surname (Last Name) Reimer	3. Date 05-February-2014	
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Lukas M. Nystrom	
5. Manuscript Title Prospective Eval		zation Prior to Referral of N	Nusculoskeletal Tumors	
6. Manuscript Ider	ntifying Number (if you kr	now it)		
			-	
Section 2.	The Work Under Co	onsideration for Public	cation	
Did you or your institution <b>at any time</b> 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				
	l .			
Section 3.	Relevant financial	activities outside the s	ubmitted 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 se present during the 36 months prior to publication.	
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Section 4.	Intellectual Prope	rty Patents & Copyric	hts	
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo				

Reimer 2



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

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Gibbs, Jr. 1



Section 1.	Identifying Inform	ation			
1. Given Name (Fi C. Parker	rst Name)	2. Surname (Last Gibbs, Jr.	Name)	3. D 05-F	ate February-2014
4. Are you the cor	responding author?	Yes ✓ N	o Correspor Lukas M.	nding Author's Name Nystrom	
5. Manuscript Title Prospective Eval	e uation of Imaging Utiliz	zation Prior to Ref	erral of Musculoske	letal Tumors	
6. Manuscript Ider	ntifying Number (if you kr	now it)			
Section 2.	The Work Under Co	onsideration fo	r Publication		
any aspect of the s statistical analysis,	ubmitted work (including	but not limited to			rcial, private foundation, etc.) for manuscript preparation,
Section 3.	Section 3. Relevant financial activities outside the submitted work.				
of compensation clicking the "Add Are there any rele	) with entities as descri	ibed in the instructions in the instruction in the	tions. Use one line	for each entity; add a	iships (regardless of amount s many lines as you need by his prior to publication.
Name of Entity		Grant? Person		Other? Comme	nts
Exactech Inc				Implant De	vice Development
Section 4.	Intellectual Proper	ty Patents &	Copyrights		
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo					

Gibbs, Jr. 2



Section 5. Polationships not severed above
Relationships not covered above
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Section 6
Section 6. Disclosure Statement
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Gibbs, Jr.



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Dean 1



Section 1. Identifyin	g Information			
Given Name (First Name) Cooper	2. Surname (Last Name) Dean	3. Date 21-May-2014		
4. Are you the corresponding au	thor? Yes V No	Corresponding Author's Name Lukas Nystrom		
5. Manuscript Title Prospective Evaluation of Ima	ging Utilization Prior to Referral of I	Musculoskeletal Tumors		
6. Manuscript Identifying Number JBJS-D-14-00186	er (if you know it)			
		_		
Section 2. The Work	Under Consideration for Publi	cation		
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Section 3. Relevant f	inancial activities outside the	submitted work.		
Place a check in the appropria of compensation) with entitie	ite boxes in the table to indicate wh s as described in the instructions. Us should report 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.		
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Dean 2



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**Grant:** A grant from an entity, generally [but not always] paid to your organization

**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

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Section 1. Identifyi	ng Information			
1. Given Name (First Name) Charles	2. Surname (Last Name) Bush	3. Date 05-February-2014		
4. Are you the corresponding a	uthor? Yes 🗸 No	Corresponding Author's Name Lukas M. Nystrom		
5. Manuscript Title Prospective Evaluation of Im	aging Utilization Prior to Referral of N	Ausculoskeletal Tumors		
6. Manuscript Identifying Numb	per (if you know it)			
Section 2. The Work	Under Consideration for Public	cation		
Did you or your institution <b>at any time</b> 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	submitted work.		
of compensation) with entitie	es as described in the instructions. Us should report 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. Intellectu	al Property Patents & Copyric	ghts		
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo				

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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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Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Bush has nothing to disclose.

#### **Evaluation and Feedback**

Please visit <a href="http://www.icmje.org/cgi-bin/feedback">http://www.icmje.org/cgi-bin/feedback</a> to provide feedback on your experience with completing this form.

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