

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Ha-Jung	2. Surname (Last Name) Kim	3. Date 12-March-2018
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Jun-Gol Song
5. Manuscript Title Staggered rather than simultaneous surgical strategy may reduce the risk of acute kidney injury in patients undergoing bilateral total knee replacement arthroplasty		
6. Manuscript Identifying Number (if you know it) JBJS-D-18-00032		

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1. Given Name (First Name)
Hee-Sun

2. Surname (Last Name)
Park

3. Date
12-March-2018

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name
Jun-Gol Song

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1. Given Name (First Name)

Jun-Gol

2. Surname (Last Name)

Song

3. Date

12-March-2018

4. Are you the corresponding author?

☒ Yes ☐ No

5. Manuscript Title

Staggered rather than simultaneous surgical strategy may reduce the risk of acute kidney injury in patients undergoing bilateral total knee replacement arthroplasty

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Jang

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Section 1. Identifying Information

1. Given Name (First Name)
Young-Jin

2. Surname (Last Name)
Ro

3. Date
12-March-2018

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name
Jun-Gol Song

5. Manuscript Title
Staggered rather than simultaneous surgical strategy may reduce the risk of acute kidney injury in patients undergoing bilateral total knee replacement arthroplasty

6. Manuscript Identifying Number (if you know it)
JBJS-D-18-00032

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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.)?

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