

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.

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

Fufa 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi Duretti	rst Name)	2. Surname (Last Name) Fufa		3. Date 07-June-2018
4. Are you the cor	responding author?	✓ Yes No		
5. Manuscript Title Generalized Join		Patients: Clinical Manifestation	ons, Radiologic Correlat	es and Management
6. Manuscript Ider	ntifying Number (if you kr	now it)		
Section 2.	The Work Under Co	onsideration for Publicat	ion	
any aspect of the s statistical analysis,	stitution at any time rece ubmitted work (including	ive payment or services from a the but not limited to grants, data r	nird party (government, co	emmercial, private foundation, etc.) for esign, manuscript preparation,
Section 3.	Relevant financial	activities outside the sub	mitted work.	
of compensation clicking the "Add) with entities as descri	bed in the instructions. Use coort relationships that were p	ne line for each entity; a	lationships (regardless of amount add as many lines as you need by nonths prior to publication.
Section 4.	Intellectual Proper	ty Patents & Copyright	s	
Do you have any		ned, pending or issued, broad		? ☐ Yes ✓ No

Fufa 2



Section 5.	
	Relationships not covered above
	relationships 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):
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	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements Irnals may ask authors to disclose further information about reported relationships.
Section 6.	
Section 6.	Disclosure Statement
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Dr. Fufa has not	hing to disclose.

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Hettler 1



Section 1. Identifying Inform	mation			
1. Given Name (First Name) Jessica	2. Surname (Last Name) Hettler	3. Date 07-June-2018		
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Duretti Fufa		
5. Manuscript Title Generalized Joint Laxity in Orthopaed	ic Patients: Clinical Manifest	tations, Radiologic Correlates and Management		
6. Manuscript Identifying Number (if you l	know it)			
Section 2. The Work Under 0	Consideration 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 Volume No				
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Section 3. Relevant financia	l activities outside the s	submitted work.		
of compensation) with entities as desc	ribed in the instructions. Us eport 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	erty Patents & Copyrig	ghts		
Do you have any patents, whether pla	nned, pending or issued, br	roadly relevant to the work? Yes V No		

Hettler 2



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

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Potter 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fii Hollis	rst Name)	2. Surname (Last Name) Potter		3. Date 07-June-2018
4. Are you the cor	ou the corresponding author? Yes V		Corresponding Author's Nam Duretti Fufa	ne
5. Manuscript Title Generalized Join		: Patients: Clinical Manifes	tations, Radiologic Correlates	s and Management
6. Manuscript Ider	ntifying Number (if you kr	now it)		
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any aspect of the s statistical analysis,	ubmitted work (including	g but not limited to grants, da	a third party (government, com Ita 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. Us port relationships that we		tionships (regardless of amount dd 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, br	roadly relevant to the work?	☐ Yes ✓ No

Potter 2



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Dr. Potter has nothing to disclose.

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Prabhakar 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi Pooja	rst Name)	2. Surname (Last Name) Prabhakar		3. Date 07-June-2018
4. Are you the cor	you the corresponding author? Yes Vo		Corresponding Author's Nan Duretti Fufa	ne
5. Manuscript Title Generalized Join		: Patients: Clinical Manifes	tations, Radiologic Correlate	s and Management
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Do you have any			roadly relevant to the work?	☐ Yes 🗸 No

Prabhakar 2



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Sacks 1



Section 1. Iden	tifying Information			
1. Given Name (First Nam Hayley	e) 2. Surnar Sacks	ne (Last Name)	3. Dat 07-Ju	te ine-2018
4. Are you the correspond	you the corresponding author? Yes Vo		Corresponding Author's Name Duretti Fufa	
5. Manuscript Title Generalized Joint Laxity	y in Orthopaedic Patients: (Clinical Manifest	ations, Radiologic Correlates and	Management
6. Manuscript Identifying	Number (if you know it)			
Section 2. The \	Work Under Considera	tion for Public	ation	
	ed work (including but not lim		a third party (government, commerci a monitoring board, study design, m	
Section 3. Relev	vant financial activities	outside the s	ubmitted work.	
of compensation) with	entities as described in the x. You should report relatio	instructions. Us	ther you have financial relationshe one line for each entity; add as represent during the 36 months	many lines as you need by
Section 4. Intel	lectual Property Pate	ents & Copyrig	hts	
Do you have any patent	ts, whether planned, pend	ng or issued, bro	oadly relevant to the work?	∕es ✓ No

Sacks 2



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Strickland 1



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4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Duretti Fufa	
5. Manuscript Title Generalized Join		: Patients: Clinical Manifest	rations, Radiologic Correlates and Management	
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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.)? Are there any relevant conflicts of interest? Yes No				
	I			
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 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	

Strickland 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):
✓ 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. Strickland 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.

Strickland 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.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

3. Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

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.

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

Wessel 1



Section 1.	Identifying Inform	nation			
1. Given Name (First Name) Lauren		2. Surname (Last Name) Wessel		3. Date 07-June-2018	
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Duretti Fufa		
5. Manuscript Title Generalized Joint Laxity in Orthopaedic Patients: Clinical Manifestations, Radiologic Correlates and Management					
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 No					
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 Proper	rty 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				
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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. Wessel has nothing to disclose.				

Evaluation and Feedback

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Wessel 3