

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) John	2. Surname (Last Name) Callander	3. Date 16-May-2018
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Mary Mulcahey
5. Manuscript Title Hamstring Injuries: Risk Factors, Treatment, and Rehabilitation		
6. Manuscript Identifying Number (if you know it) JBJS-D-18-00261		

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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

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Mr. Callander has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Steven

2. Surname (Last Name)
Heer

3. Date
16-May-2018

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name
Mary Mulcahey

5. Manuscript Title
Hamstring Injuries: Risk Factors, Treatment, and Rehabilitation

6. Manuscript Identifying Number (if you know it)
JBJS-D-18-00261

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Mr. Heer has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Matthew

2. Surname (Last Name)

Kraeutler

3. Date

16-May-2018

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Mary Mulcahey

5. Manuscript Title

Hamstring Injuries: Risk Factors, Treatment, and Rehabilitation

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Dr. Kraeutler has nothing to disclose.

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1. Given Name (First Name)

Mary

2. Surname (Last Name)

Mulcahey

3. Date

16-May-2018

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☒ Yes ☐ No

5. Manuscript Title

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If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Stryker	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Receive research support, none relevant to this paper though

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Dr. Mei Dan reports grants from Stryker, outside the submitted work; .

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