

#### **Instructions**

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He 1



Section 1. Iden	tifying Information		
1. Given Name (First Nam Yu	e) 2. Surna He	ame (Last Name)	3. Date 04-October-2018
4. Are you the correspond	4. Are you the corresponding author?		Corresponding Author's Name Dongsheng Zhou and Lianxin Li
5. Manuscript Title Treatment of Partial Tra	numatic Hemipelvectomy	Experience with	21 cases
6. Manuscript Identifying JBJS-D-18-00877_R1	Number (if you know it)		_
6 11 6			
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Do you have any paten	ts, whether planned, pend	ding or issued, br	roadly relevant to the work? Yes V No

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Qiu 1



Section 1. Identifyin	g Information			
1. Given Name (First Name) Daodi	2. Surname (Last Name) Qiu	3. Date 04-October-2018		
4. Are you the corresponding au	thor? Yes V No	Corresponding Author's Name Dongsheng Zhou and Lianxin Li		
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Do you have any patents, who	ether planned, pending or issued,	broadly relevant to the work? Yes V No		

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Zhou 1



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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

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Section 1. Identifying Inform	nation			
1. Given Name (First Name) Lianxin	2. Surname (Last Name) Li	3. Date 04-October-2018		
4. Are you the corresponding author?	Are you the corresponding author?  Yes No			
5. Manuscript Title Treatment of Partial Traumatic Hemipe	lvectomy: Experience with 21 cases			
6. Manuscript Identifying Number (if you kr JBJS-D-18-00877_R1	now it)			
Section 2. The Work Under Co	onsideration for Publication			
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				
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Section 5. Belationships not severed above			
Relationships not covered above			
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Dr. Li has nothing to disclose.			

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