

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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1. Identifying information.

2. The work under consideration for publication.

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

5. Relationships not covered above.

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Pending: The patent has been filed but not issued

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Anton

2. Surname (Last Name)

Lambers

3. Date

26-August-2018

4. Are you the corresponding author?

☒ Yes ☐ No

5. Manuscript Title

Implant Fracture Analysis of the TFNA Proximal Femoral Nail

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

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☐ Yes ☒ No

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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. Lambers has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Peter	2. Surname (Last Name) D'Alessandro	3. Date 26-August-2018
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Anton Lambers
5. Manuscript Title Implant Fracture Analysis of the TFNA Proximal Femoral Nail		
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 submitted work.

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Are there any relevant conflicts of interest? ☒ Yes ☐ No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Smith and Nephew	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Ossur	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Lima Corporate	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☐ Yes ☒ No

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Dr. D'Alessandro reports personal fees and non-financial support from Smith and Nephew, non-financial support from Ossur, non-financial support from Lima Corporate, outside the submitted work; .

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Section 1. Identifying Information

1. Given Name (First Name)

Alan

2. Surname (Last Name)

Kop

3. Date

26-August-2018

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Anton Lambers

5. Manuscript Title

Implant Fracture Analysis of the TFNA Proximal Femoral Nail

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Section 1. Identifying Information

1. Given Name (First Name)

Bertram

2. Surname (Last Name)

Rieger

3. Date

26-August-2018

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Anton Lambers

5. Manuscript Title

Implant Fracture Analysis of the TFNA Proximal Femoral Nail

6. Manuscript Identifying Number (if you know it)

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Dr. Rieger has nothing to disclose.

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1. Given Name (First Name) Piers	2. Surname (Last Name) Yates	3. Date 26-August-2018
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Anton Lambers
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If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Global Orthopaedics	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
DePuy Synthes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Yates reports personal fees from Global Orthopaedics, grants from DePuy Synthes, outside the submitted work; and consultant for depuy synthes.

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