

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.

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

Blachut 1



Section 1. Identifying Inforn	nation	
1. Given Name (First Name) Piotr	2. Surname (Last Name) Blachut	3. Date 12-November-2018
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Peter O'Brien
5. Manuscript Title The Feasibility of a Randomized Contro	olled Trial for Open Tibial Fr	actures at a Regional Hospital in Uganda
6. Manuscript Identifying Number (if you k	now it)	
		-
Section 2. The Work Under C	onsideration for Public	ation
	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,
Section 3. Polovant financial		ub wister d weath
Place a check in the appropriate boxes of compensation) with entities as descr	ibed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amount e one line for each entity; add as many lines as you need by e present during the 36 months prior to publication.
Section 4. Intellectual Prope	rty Patents & Copyrig	hts
Do you have any patents, whether plan	ned, pending or issued, bro	oadly relevant to the work? Yes V No

Blachut 2



Section 5. Polationships not severed above						
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. Blachut has nothing to disclose.						

Evaluation and Feedback

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Blachut 3



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Howe 1



Section 1. Identifying Inform	mation	
1. Given Name (First Name) Andrea	2. Surname (Last Name) Howe	3. Date 12-November-2018
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Peter O'Brien
5. Manuscript Title The Feasibility of a Randomized Contro	olled Trial for Open Tibial Fr	actures at a Regional Hospital in Uganda
6. Manuscript Identifying Number (if you k	now it)	
Section 2. The Work Under C	Consideration for Public	ation
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Section 3. Relevant financial	l activities outside the s	ubmitted work.
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Do you have any patents, whether plan		

Howe 2



Section 5.	
Section 5.	Relationships not covered above
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Ms. Howe has no	othing to disclose.

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Kisitu 1



Section 1. Identifying Info	rmation	
1. Given Name (First Name) Daniel	2. Surname (Last Name) Kisitu	3. Date 12-November-2018
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Peter O'Brien
5. Manuscript Title The Feasibility of a Randomized Cont	rolled Trial for Open Tibial Fr	ractures at a Regional Hospital in Uganda
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Do you have any patents, whether pla		

Kisitu 2



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Marinos 1



Section 1. Identifying Inform	mation	
Given Name (First Name) Dimitrius	2. Surname (Last Name) Marinos	3. Date 12-November-2018
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Peter O'Brien
5. Manuscript Title The Feasibility of a Randomized Contr	olled Trial for Open Tibial Fr	actures at a Regional Hospital in Uganda
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Marinos 2



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=	evant conflicts of inter	est? ✓ Yes	No		
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Excess rows can	be removed by pressir	ng the "X" button.			
Name of Institut	ion/Company	Grant? Persona	Non-Financial Support?	Other?	Comments
AO Alliance Foundati	on	✓			
AO Trauma North Am	nerica	✓			
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If yes, please fill o	out the appropriate inf	ormation below.			
Name of Entity		Grant? Persona	Non-Financial Support?	Other?	Comments
Depuy, Johnson & Jo	hnson			✓	
Stryker					



Name of Entity	Grant?	Personal Fees	Non-Financial Support?	Other?	Comments	
Synthes		✓				
Zimmer		✓		✓		
		_				
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Dr. O'Brien reports grants from AO Allian study; other from Depuy, Johnson & Joh other from Zimmer, outside the submitt	nson, pei	rsonal fees				



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O'Hara 1



Castion 1					
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Given Name (First Name) Nathan	2. Surname (Last Name) O'Hara	3. Date 12-November-2018			
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Peter O'Brien			
5. Manuscript Title The Feasibility of a Randomized Contro	olled Trial for Open Tibial F	ractures at a Regional Hospital in Uganda			
6. Manuscript Identifying Number (if you k	now it)				
		_			
Section 2. The Work Under C	onsideration for Public				
The work onder C					
any aspect of the submitted work (includin statistical analysis, etc.)?	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,			
Are there any relevant conflicts of inter		re more than one entity press the "ADD" button to add a row			
If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.					
Name of Institution/Company	Grant	n-Financial other? Comments			
AO Alliance Foundation	✓				
Section 3. Relevant financial	activities outside the s	submitted work.			
of compensation) with entities as descri	ribed in the instructions. Us	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by the present during the 36 months prior to publication.			
Are there any relevant conflicts of inter	· ·	- process as many many many many many many many many			
If yes, please fill out the appropriate inf					
	Personal Noi	n-Financial out 7 Comments			
Name of Entity	Grant	upport? Other Comments			
Arbutus Medical, Inc.		Stock Options			

O'Hara 2



Section 4. Intellectual Property Patents & Copyrights
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo
Section 5. 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?
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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.
Mr. O'Hara reports grants from AO Alliance Foundation, during the conduct of the study; other from Arbutus Medical, Inc., outside the submitted work; .

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O'Hara 3



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Identifying information.

2. The work under consideration for publication.

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Peck 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fill Connor	ven Name (First Name) 2. Surname (Last			3. Date 12-November-2018
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Nam Peter O'Brien	ne
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			_	
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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 ta monitoring board, study des	nmercial, private foundation, etc.) for ign, manuscript preparation,
Section 3.	Relevant financial	activities outside the s	submitted work.	
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Section 4.	Intellectual Proper	rty Patents & Copyric	yhts	
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes V				

Peck 2



Section 5. Relationships not covered above			
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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?			
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Mr. Peck has nothing to disclose.			

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

Slobogean 1



Section 1. Identifying Inform							
Identifying Inform	nation						
1. Given Name (First Name) Gerard	2. Surname (Last Name) Slobogean	3. Date 12-November-2018					
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Na Peter O'Brien	hor's Name				
5. Manuscript Title The Feasibility of a Randomized Contro	lled Trial for Open Tibial Fr	ractures at a Regional Hosp	pital in Uganda				
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Relevant financial	activities outside the	submitted work.					
Place a check in the appropriate boxes of compensation) with entities as descr clicking the "Add +" box. You should repare there any relevant conflicts of interesting the please fill out the appropriate info	ibed in the instructions. Us port relationships that wer est?	se one line for each entity; are present during the 36 m	add as many lines as you need	d by			
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PCORI	✓						
Smith & Nephew							
US Department of Defense	✓						
7immer							

Slobogean 2



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Dr. Slobogean reports grants from PCORI, personal fees from Smith & Nephew, grants from US Department of Defense, personal fees from Zimmer, outside the submitted work; .				

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Stockton 1



Section 1.	Identifying Inform	ation				
Given Name (First Name) David		2. Surname (Last Name) Stockton		3. Date 12-November-2018		
4. Are you the corresponding author?		Yes	Yes No Corresponding Author's Name Peter O'Brien		Name	
5. Manuscript Title The Feasibility of a Randomized Controlled Trial for Open Tibial Fractures at a Regional Hospital in Uganda						
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Section 2.	The Work Under Co	onsiderat	tion for Publi	cation		
	ubmitted work (including					commercial, private foundation, etc.) for design, manuscript preparation,
Are there any rel	Are there any relevant conflicts of interest? Ves No					
	out the appropriate info be removed by pressing			ve more thai	n one entity p	press the "ADD" button to add a row.
Name of Institut		Grant?	Personal No	n-Financial Support	Other? C	comments
AO Trauma North America		✓				
JBC Branch for Interr	national Surgery	√				
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Section 3.	Relevant financial	activities	outside the	submitted	work.	
of compensation	n) with entities as descri	bed in the	instructions. U	se one line f	or each entity	relationships (regardless of amount y; add as many lines as you need by 5 months prior to publication.
Are there any rel	evant conflicts of intere	st?	∕es ✓ No			
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Section 4.	Intellectual Proper	ty Pate	nts & Copyri	ghts		
Do you have any	patents, whether planr	ned, pendi	ng or issued, b	roadly releva	ant to the wo	rk? Yes 🗸 No

Stockton 2



Section 5. Polationships not sovered above
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Dr. Stockton reports grants from AO Trauma North America, grants from UBC Branch for International Surgery, during the conduct of the study; .

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