

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.

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

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Section 1. Identifying Information					
1. Given Name (First Name) Steve	2. Surname (Last Name) Lee		3. Date 06-March-2019		
4. Are you the corresponding author?	Yes 🗸 No	Corresponding Au Scott W. Wolfe, N			
5. Manuscript Title What causes Dorsal Intercalate Segment Carpal Row.	Instability? A Cadaveri	c Study of the Critica	Ligament Stabilizers of the Proximal		
6. Manuscript Identifying Number (if you kno	ow it)				
Section 2. The Work Under Co					
The Work Under Co	nsideration for Pub	lication			
any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants,		ment, commercial, private foundation, etc.) for , study design, manuscript preparation,		
Section 3. Relevant financial a	activities outside the	submitted work.			
	oed in the instructions. ort relationships that w st?	Use one line for each ere present during	ancial relationships (regardless of amount entity; add as many lines as you need by the 36 months prior to publication .		
Name of Entity	Grant? Personal N	on-Financial Support?	? Comments		
Arthrex	✓		Consultant, Research support, royalties		
Axogen	✓		Consultant, Research support		
BME			Consultant		
Checkpoint			Consultant		
ntegra	✓		Research support		
Cartiva	✓		Research support		



Section 4. Intellectual Property Patents & Copyrights
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Volume No
Section 5. Relationships not covered above
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Dr. Lee reports grants and personal fees from Arthrex, grants and personal fees from Axogen, personal fees from BME, personal fees from Checkpoint, grants from Integra, grants from Cartiva, outside the submitted work.

Evaluation and Feedback

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Jethanandani 1



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1. Given Name (Fir Rishabh	rst Name)	2. Surname (Last Name) Jethanandani	3. Date 06-March-2019
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Scott W. Wolfe, MD
5. Manuscript Title What causes Dor Carpal Row.		nt Instability? A Cadaveric S	tudy of the Critical Ligament Stabilizers of the Proximal
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Jethanandani 2



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Rishabh Jethanandani has nothing to disclose.

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Jethanandani 3



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Meyers 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi Kathleen	rst Name)	2. Surname (Last Name) Meyers	3. Date 06-March-2019
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Scott W. Wolfe, MD
5. Manuscript Title What causes Dor Carpal Row.		t Instability? A Cadaveric S	tudy of the Critical Ligament Stabilizers of the Proximal
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Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? ☐ Yes ✓ No

Meyers 2



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Dr. Meyers has nothing to disclose.

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Meyers 3



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Perez 1



Section 1.	Identifying Inform	ation	
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4. Are you the corr	responding author?	Yes ✓ No	Corresponding Author's Name Scott W. Wolfe, MD
5. Manuscript Title What causes Dor Carpal Row.		t Instability? A Cadaveric S	tudy of the Critical Ligament Stabilizers of the Proximal
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Do you have any	patents, whether plan	ned, pending or issued, bro	oadly relevant to the work? Yes V No

Perez 2



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Vutescu 1



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4. Are you the cor	responding author?	☐ Yes ✓ No	Corresponding Author's Nam Scott W. Wolfe, MD	ne
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Wolfe 1



Section 1. Identifying Information						
Given Name (First Name) Scott	2. Surname (Last Nar Wolfe	ne)		3. Date 06-March-2019		
4. Are you the corresponding author?	✓ Yes No					
5. Manuscript Title What causes Dorsal Intercalate Segment Instability? A Cadaveric Study of the Critical Ligament Stabilizers of the Proximal Carpal Row.						
6. Manuscript Identifying Number (if you kno	ow it)					
Section 2. The Work Under Co	nsideration for P	ublication				
Did you or your institution at any time received any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of interests	but not limited to gran				c.) for	
Section 3. Relevant financial a	activities outside :	the 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 .						
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Name of Entity	Grant? Personal Fees?	Non-Financial Support?	Other?	Comments		
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Extremity Medical			✓	consulting fees, royalties, patent		
Гoyoba, lnc.			✓	contracted research		
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Section 4. Intellectual Property Patents & Copyrights
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes V
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Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
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Evaluation and Feedback

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