

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

Tucker 1



Section 1. Identifying Inform	nation			
Given Name (First Name) Bradford	2. Surname (Last Name) Tucker	3. Date 24-March-2019		
4. Are you the corresponding author?	☐ Yes 🗸 No	Corresponding Author's Name Fotios Tjoumakaris		
5. Manuscript Title Prevalence of Clinical Depression amor	ng Patients after Shoulder	Stabilization Repair: A Prospective Study		
6. Manuscript Identifying Number (if you kr JBJS-D-18-01460R1	now it)			
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If yes, please fill out the appropriate info				
Name of Entity	Grant? Personal Fees? S	n-Financial Other? Comments		
Johnson & Johnson		Stock or Stock Options		
Mitek and DePuy				
Section 4. Intellectual Prope	rty Patents & Copyri	ghts		
Do you have any patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No		

Tucker 2



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Dr. Tucker reports other from Johnson & Johnson, personal fees from Mitek and DePuy, outside the submitted work; .

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Weekes 1



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4. Are you the corr	responding author?	Yes ✓ No	Corresponding Author's Name Fotios Tjoumakaris	
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Dr. Weekes has nothing to disclose.

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Shi 1



Section 1. Identifying Inform	nation		
Given Name (First Name) Weilong	2. Surname (Last Name) Shi	3. Date 24-March-2019	
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Fotios Tjoumakaris	
5. Manuscript Title Prevalence of Clinical Depression amor	ng Patients after Shoulder S	Stabilization Repair: A Prospective Study	
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patent

Freedman 1



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4. Are you the cor	esponding author? Yes V No		Corresponding Author's Name Fotios Tjoumakaris	
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ii yes, pieuse iiii e	out the appropriate init	ormación serow.		
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DePuy				
/ericel				
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Freedman 2



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Pepe 1



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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

Giunta 1



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Nicholas	2. Surname (Last Name) Giunta		3. Date 24-March-2019
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Nan Fotios Tjoumakaris	ne
5. Manuscript Title Prevalence of Clinical Depression amon	ng Patients after Shoulder S	Stabilization Repair: A Prosp	ective Study
6. Manuscript Identifying Number (if you kr JBJS-D-18-01460R1	now it)		
		-	
Section 2. The Work Under Co	onsideration for Public	ation	
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 s	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 . Are there any relevant conflicts of interest? Yes Vo			
Section 4. Intellectual Proper	rty Patents & Copyrig	ahts	
Do you have any patents, whether plan			☐ Yes ✓ No

Giunta 2



Section 5. Relationships not severed above	,				
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?					
Yes, the following relationships/conditions/circumstances are present (explain below):					
✓ No other relationships/conditions/circumstances that present a potential conflict of interest					
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements On occasion, journals may ask authors to disclose further information about reported relationships.					
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. Giunta has nothing to disclose.					

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Giunta 3



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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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2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

3. Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

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Campbell 1



Section 1.	Identifying Information						
1. Given Name (First Name) Richard		2. Surname (Last Name) Campbell	3. Date 24-March-2019				
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Fotios Tjoumakaris				
5. Manuscript Title Prevalence of Clinical Depression amon		g Patients after Shoulder S	Stabilization Repair: A Prospective Study				
6. Manuscript Identifying Number (if you know it) JBJS-D-18-01460R1							
Section 2. The Work Under Consideration for Publication							
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Section 3.	Relevant financial	activities outside the s	submitted work.				
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Section 4.	Intellectual Proper	ty Patents & Copyric	ghts				
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo							

Campbell 2



Section 5. Relationships not sovered above				
Relationships not covered above				
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Section 6. Disclosure Statement				
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Dr. Campbell has nothing to disclose.				

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Campbell 3



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Tjournakaris 1



Section 1.	Identifying Inform	aation					
Given Name (First Name) Fotios		2. Surname (Last Name) Tjoumakaris		3. Date 24-March-2019			
4. Are you the corresponding author?		✓ Yes No					
5. Manuscript Title Prevalence of Clinical Depression among Patients after Shoulder Stabilization Repair: A Prospective Study							
6. Manuscript Identifying Number (if you know it) JBJS-D-18-01460R1							
Section 2.							
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 Vo							
Section 3.	Relevant financial	activities outside t	he submitted	work.			
of compensation clicking the "Add Are there any rele) with entities as descri	bed in the instruction port relationships that est? Yes I	is. Use one line fo	or each entity;	elationships (regardless of amount add as many lines as you need by months prior to publication.		
Name of Entity		Grant? Personal Fees?	Non-Financial Support?	Other? Co	omments		
ranklin/Keystone Bio	osciences, LLC			√ Stoc	k or stock Options		
Frice Medical, Inc				Stoo	ck or stock Options		
Section 4.	Intellectual Proper	ty Patents & Cop	yrights				
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo							

Tjoumakaris 2



Section 5.	
Section 5.	Relationships not covered above
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Dr. Tjoumakaris work; .	reports other from Franklin/Keystone Biosciences, LLC, other from Trice Medical, Inc, outside the submitted

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