

#### Instructions

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## 1. Identifying information.

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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 Inform	nation		
1. Given Name (Fir Kethy	rst Name)	2. Surname (Last Name) Jules-Elysee	3. Date 22-May-2019	_
4. Are you the corr	responding author?	✓ Yes No		

5. Manuscript Title

The Effect of Topical and Intravenous Tranexamic Acid (TXA) on TXA levels, Thrombogenic and Inflammatory Markers in Patients Undergoing Total Knee Replacement– A Randomized Double-Blind Controlled Study

6. Manuscript Identifying Number (if you know it)

JBJS-D-19-00258

## Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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?	Personal Fees?	Non-Financial Support	Other?	Comments	
REDCap use was supported by the National Center for Advancing Translational Science of the National Institute of Health (UL1TR000457)	$\checkmark$				Grant support provided to institution.	

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Are there any relevant conflicts of interest? Yes

5 🖌 No

## Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes

🖌 No



## 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

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Dr. Jules-Elysee reports grants from REDCap use was supported by the National Center for Advancing Translational Science of the National Institute of Health (UL1TR000457), during the conduct of the study; .

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Section 1.	Identifying Info	rmation	
1. Given Name (F Audrey	irst Name)	2. Surname (Last Name) Tseng	3. Date 16-May-2019
4. Are you the co	rresponding author?	Yes 🖌 No	Corresponding Author's Name Kethy Jules-Elysee, MD
	pical and Intravenous		TXA levels, Thrombogenic and Inflammatory Markers in Double-Blind Controlled Study
6. Manuscript Ide JBJS-D-19-00258	ntifying Number (if you 8	know it)	

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Are there any relevant conflicts of interest?		Yes	$\checkmark$	No
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Are there any relevant conflicts of interest? Yes 🗸 No

Do you have any patents, whether planned, penuing of issued, broadly relevant to the work?     res   $\mathbf{v}$   no	e any patents, whether planned, pending or issued, broadly relevant to	the work?	Yes	🖌 No
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Audrey Tseng has nothing to disclose.

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Section 1.	Identifying Infor	mation	
1. Given Name (F Amanda	irst Name)	2. Surname (Last Name) Pickard	3. Date 14-May-2019
4. Are you the co	rresponding author?	Yes 🖌 No	Corresponding Author's Name Kethy Jules-Elysee, MD
	pical and Intravenous		TXA levels, Thrombogenic and Inflammatory Markers in Double-Blind Controlled Study
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Are there any relevant conflicts of interest?		Yes	$\checkmark$	No
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Are there any relevant conflicts of interest?		Yes	$\checkmark$	No
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bo you have any patents, whether planned, penaing of issued, broadly relevant to the work.	1.05		



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Dr. Pickard has nothing to disclose.

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Section 1. Identifying Info	ormation	
1. Given Name (First Name) Justin	2. Surname (Last Name) Cross	3. Date 15-May-2019
4. Are you the corresponding author?	Yes 🗸 No	Corresponding Author's Name Kethy Jules-Elysee
5. Manuscript Title The Effect of Topical and Intravenou Patients Undergoing Total Knee Rep		TXA levels, Thrombogenic and Inflammatory Markers in Double-Blind Controlled Study
6. Manuscript Identifying Number (if yo JBJS-D-19-00258	u know it)	

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Are there any relevant conflicts of interest? Yes 🗸 No

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?	Yes	$\checkmark$	No



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Dr. Cross has nothing to disclose.

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No

Are there any relevant conflicts of interest?  $\checkmark$  Yes

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees <b>?</b>	Non-Financial Support?	Other?	Comments	
Smith and Nephew, Inc	$\checkmark$	$\checkmark$				
United Orthopedics, Inc	$\checkmark$	$\checkmark$				

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. Su reports grants and personal fees from Smith and Nephew, Inc, grants and personal fees from United Orthopedics, Inc, outside the submitted work; .

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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



Section 1.	Identifying Inform	nation		
1. Given Name (Fi Thomas	rst Name)	2. Surnar Sculco	ne (Last Name)	3. Date 20-May-2019
4. Are you the corresponding author?		Yes	✓ No	Corresponding Author's Name Kethy Jules-Elysee, MD
	pical and Intravenous T			XA levels, Thrombogenic and Inflammatory Markers in puble-Blind Controlled Study
6. Manuscript Ide	ntifying Number (if you kr	now it)		

JBJS-D-19-00258

## Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes 🖌 No

# Section 3. Relevant financial activities outside the submitted work.

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No

Are there any relevant conflicts of interest?  $\checkmark$  Yes

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees <b>?</b>	Non-Financial Support?	Other?	Comments	
Lima				$\checkmark$	Consultant	
Exactech				$\checkmark$	Royalty	

Section 4.

#### **Intellectual Property -- Patents & Copyrights**

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



## 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?

Yes, the following relationships/conditions/circumstances are present (explain below):

✓ No other relationships/conditions/circumstances that present a potential conflict of interest

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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. Sculco reports other from Lima, other from Exactech, outside the submitted work; .

#### **Evaluation and Feedback**



#### Instructions

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Section 1.	Identifying Infor	mation	
1. Given Name (Fi Weige	irst Name)	2. Surname (Last Name) Qin	3. Date 14-May-2019
4. Are you the co	rresponding author?	Yes 🖌 No	Corresponding Author's Name Kethy Jules-Elysee, MD
	pical and Intravenous		TXA levels, Thrombogenic and Inflammatory Markers in Double-Blind Controlled Study
6. Manuscript Ide JBJS-D-19-00258	ntifying Number (if you	know it)	

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Are there any relevant conflicts of interest?		Yes	$\checkmark$	No
---	--	-----	--------------	----

# Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest?		Yes	$\checkmark$	No
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?	ΓY	′es	✓ No	
	1 1		•	



## Section 5. 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.

Weige Qin has nothing to disclose.

#### **Evaluation and Feedback**



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Section 1.	Identifying Infor	mation	
1. Given Name (Fi Lila	irst Name)	2. Surname (Last Name) Baaklini	3. Date 15-May-2019
4. Are you the cor	responding author?	Yes 🖌 No	Corresponding Author's Name Kethy Jules-Elysee, MD
•	pical and Intravenous		TXA levels, Thrombogenic and Inflammatory Markers in ouble-Blind Controlled Study
6. Manuscript Ide	ntifying Number (if you 3	know it)	,

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Are there any relevant conflicts of interest?		Yes	$\checkmark$	No
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Are there any relevant conflicts of interest?		Yes	$\checkmark$	No
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$\mathbf{v}$	Do you have any patents, whether planned, pending or issued, broadly relevant to the work? $\; [$	Yes	🖌 No	
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Dr. Baaklini has nothing to disclose.

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Section 1. Ide	entifying Informa	ition	
1. Given Name (First Na David	ame)	2. Surname (Last Name) Mayman	3. Date 22-May-2019
4. Are you the correspo	onding author?	Yes 🖌 No	Corresponding Author's Name Kethy Jules-Elysee, MD
•			n TXA levels, Thrombogenic and Inflammatory Markers in Double-Blind Controlled Study
6. Manuscript Identifyir	ng Number (if you kno	w 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	$\checkmark$	No
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Are there any relevant conflicts of interest?  $\Box$  Yes  $\checkmark$  No

bo you have any patents, whether planned, pending of issued, broadily relevant to the work:     res   <b>y</b>   no	you have any patents, whether planned, pending or issued, broadly relevant to the	work? Yes	🖌 No
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## Section 5. Relationships not covered above

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## Section 6. Disclosure Statement

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Dr. Mayman has nothing to disclose.

#### **Evaluation and Feedback**



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Section 1.	Identifying Info	mation	
1. Given Name (F Alexander	irst Name)	2. Surname (Last Name) McLawhorn	3. Date 21-May-2019
4. Are you the co	rresponding author?	Yes 🖌 No	Corresponding Author's Name Kethy Jules-Elysee, MD
	pical and Intravenous		TXA levels, Thrombogenic and Inflammatory Markers in Double-Blind Controlled Study
6. Manuscript Ide	ntifying Number (if you	know it)	

JBJS-D-19-00258

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Are there any relevant conflicts of interest?	Yes	$\checkmark$	No
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No

Are there any relevant conflicts of interest?  $\checkmark$  Yes

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees <b>?</b>	Non-Financial Support?	Other?	Comments	
Intellijoint Surgical		$\checkmark$				
Ethicon		$\checkmark$				

**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. McLawhorn reports personal fees from Intellijoint Surgical, personal fees from Ethicon, outside the submitted work; .

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Section 1. Identifying Info	rmation	
1. Given Name (First Name) Kara	2. Surname (Last Name) Fields	3. Date 15-May-2019
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Name Kethy M. Jules-Elysee
5. Manuscript Title The Effect of Topical and Intravenou Patients Undergoing Total Knee Rep		TXA levels, Thrombogenic and Inflammatory Markers in Double-Blind Controlled Study
6. Manuscript Identifying Number (if you JBJS-D-19-00258	ı know it)	

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Are there any relevant conflicts of interest?		Yes	$\checkmark$	No
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Are there any relevant connicts of interest:	here any relevant conflicts of interest? Yes	$\checkmark$	No
--	--	--------------	----

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?		Yes	N/	0
	1 1			-



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Ms. Fields has nothing to disclose.

#### **Evaluation and Feedback**