

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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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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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Steve	2. Surname (Last Name) Bayer	3. Date 02-August-2019
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Volker Musahl
5. Manuscript Title Knee Morphological Risk Factors for Anterior Cruciate Ligament Injury: A Systematic Review		
6. Manuscript Identifying Number (if you know it) JBJS-D-19-00535R1		

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

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Mr. Bayer has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Kevin	2. Surname (Last Name) Byrne	3. Date 02-August-2019
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Volker Musahl, MD
5. Manuscript Title Knee Morphological Risk Factors for Anterior Cruciate Ligament Injury: A Systematic Review		
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Kevin Byrne has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Darren	2. Surname (Last Name) de SA	3. Date 16-August-2019
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Volker Musahl
5. Manuscript Title Knee Morphological Risk Factors for Anterior Cruciate Ligament Injury: A Systematic Review		
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Dr. de SA has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Christine

2. Surname (Last Name)
McDonough

3. Date
29-September-2019

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Volker Musahl, MD

5. Manuscript Title
Knee Morphological Risk Factors for Anterior Cruciate Ligament Injury: A Systematic Review

6. Manuscript Identifying Number (if you know it)
JBJS-D-19-00535R2

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Dr. McDonough has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Sean

2. Surname (Last Name)
Meredith

3. Date
01-August-2019

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name
Volker Musahl

5. Manuscript Title

Knee Morphological Risk Factors for Anterior Cruciate Ligament Injury: A Systematic Review

6. Manuscript Identifying Number (if you know it)

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Dr. Meredith has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Volker

2. Surname (Last Name)
Musahl

3. Date
31-July-2019

4. Are you the corresponding author? ☒ Yes ☐ No

5. Manuscript Title
Knee Morphological Risk Factors for Anterior Cruciate Ligament Injury: A Systematic Review

6. Manuscript Identifying Number (if you know it)
JBJS-D-19-00535R1

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

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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 & Nephew	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consulting
Arthrex	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Education payments, hospitality payments

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

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Dr. Musahl reports other from Smith & Nephew, grants from Arthrex, outside the submitted work; .

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1. Identifying information.

2. The work under consideration for publication.

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1. Given Name (First Name)
Thierry

2. Surname (Last Name)
Pauyo

3. Date
01-August-2019

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☐ Yes ☒ No

Corresponding Author's Name
Volker Musahl

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Dr. Pauyo has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Kevin

2. Surname (Last Name)
Wilson

3. Date
01-August-2019

4. Are you the corresponding author?

☐ Yes☒ No

Corresponding Author's Name
Volker Musahl

5. Manuscript Title

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