

ICMJE Form for Disclosure of Potential Conflicts of Interest

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.

1. Identifying information.

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.

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4. Intellectual Property.

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

5. Relationships not covered above.

Use this section to report 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.

Definitions.

Entity: government agency, foundation, commercial sponsor, academic institution, etc.

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Personal Fees: Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

Non-Financial Support: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

| | | |
|--|-----------------------------------|---|
| 1. Given Name (First Name) Gulraj | 2. Surname (Last Name) Matharu | 3. Date 02-November-2019 |
| 4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Corresponding Author's Name Hasan Mohammad |
| 5. Manuscript Title The effect of surgeon caseload on the relative revision rate of cemented and cementless Unicompartmental Knee Replacements: An analysis from the National Joint Registry for England, Wales, Northern Ireland and the Isle of Man | | |
| 6. Manuscript Identifying Number (if you know it) JBJS-D-19-01060R1 | | |

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 ☒ No

Section 3. Relevant financial 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**.

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 |
|---|-------------------------------------|-------------------------------------|--------------------------|--------------------------|---|
| The Royal Orthopaedic Hospital Hip Research and Education Charitable Fund | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Grant provided for PhD tuition fees and conference travel to present other research work. |
| The Orthopaedics Trust | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Grant provided for PhD tuition fees and to present other research work. |
| Arthritis Research UK | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Awarded an 18 month Clinical Research Fellowship for other research work. |
| Leigh Day | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Medicolegal work as expert on MoM hip cases |

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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 ☒ 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

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Matharu reports grants from The Royal Orthopaedic Hospital Hip Research and Education Charitable Fund, grants from The Orthopaedics Trust, grants from Arthritis Research UK, personal fees from Leigh Day, outside the submitted work; .

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

| | | |
|--|---------------------------------|---|
| 1. Given Name (First Name) Andrew | 2. Surname (Last Name) Judge | 3. Date 02-November-2019 |
| 4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Corresponding Author's Name Hasan Mohammad |
| 5. Manuscript Title The effect of surgeon caseload on the relative revision rate of cemented and cementless Unicompartmental Knee Replacements: An analysis from the National Joint Registry for England, Wales, Northern Ireland and the Isle of Man | | |
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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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| Name of Entity | Grant? | Personal Fees? | Non-Financial Support? | Other? | Comments |
|--------------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|----------------------------------|
| Freshfields Bruckhaus Deringer | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Consultancy |
| Anthera Pharmaceuticals Inc | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Data Safety and Monitoring Board |

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. Judge reports personal fees from Freshfields Bruckhaus Deringer, personal fees from Anthera Pharmaceuticals Inc, outside the submitted work; .

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Section 1. Identifying Information

1. Given Name (First Name)
Hasan

2. Surname (Last Name)
Mohammad

3. Date
02-November-2019

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

5. Manuscript Title
The effect of surgeon caseload on the relative revision rate of cemented and cementless Unicompartmental Knee Replacements: An analysis from the National Joint Registry for England, Wales, Northern Ireland and the Isle of Man

6. Manuscript Identifying Number (if you know it)
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| Name of Entity | Grant? | Personal Fees? | Non-Financial Support? | Other? | Comments |
|------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|---|
| Royal College of Surgeons | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | RCS Research Fellowship Grant |
| Zimmer Biomet Research Grant | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Zimmer Biomet Research Grant to Oxford University |

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. Mohammad reports grants from Royal College of Surgeons , grants from Zimmer Biomet Grant , outside the submitted work; .

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

| | | |
|--|----------------------------------|--|
| 1. Given Name (First Name) David | 2. Surname (Last Name) Murray | 3. Date 02-November-2019 |
| 4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Corresponding Author's Name Hasan Raza Mohammad |
| 5. Manuscript Title The effect of surgeon caseload on the relative revision rate of cemented and cementless Unicompartmental Knee Replacements: An analysis from the National Joint Registry for England, Wales, Northern Ireland and the Isle of Man | | |
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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 |
|-----------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|----------|
| Zimmer Biomet | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

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

| Patent? | Pending? | Issued? | Licensed? | Royalties? | Licensee? | Comments |
|---|--------------------------|-------------------------------------|--------------------------|-------------------------------------|-----------|----------|
| Various patents relating to unicompartmental knee replacement | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | | |

Section 5. Relationships not covered above

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Dr. Murray reports grants from Zimmer Biomet , during the conduct of the study; grants and personal fees from Zimmer Biomet, outside the submitted work; In addition, Dr. Murray has a patent Various patents relating to unicompartmental knee replacement with royalties paid.

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