

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.

Relationships not covered above.

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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

Brooks 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Peter	2. Surname (Last Name) Brooks	3. Date 23-August-2019
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Nicolas Piuzzi
Manuscript TitleDo Patient-Reported Outcomes Measu Arthroplasty?	res (Pain, Function, and Qu	uality of Life) Improve After Aseptic Revision Total Knee
6. Manuscript Identifying Number (if you k	now it)	
		_
Section 2. The Work Under C	Consideration for Public	cation
	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Section 3. Relevant financial	activities outside the s	submitted work.
of compensation) with entities as desc	ribed in the instructions. Us	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication.
Are there any relevant conflicts of inter	rest? 🗸 Yes 🗌 No	
If yes, please fill out the appropriate in	formation below.	
Name of Entity	Giant	on-Financial Other? Comments
Smith and Nephew		Consulting
Section 4. Intellectual Prope	rty Patents & Copyri	ghts
Do you have any patents, whether plar If yes, please fill out the appropriate in Excess rows can be removed by pressir	formation below. If you hav	roadly relevant to the work? ✓ Yes No we more than one entity press the "ADD" button to add a row.

Brooks 2



Patent?	Pending?	Issued?	Licensed?	Royalties?	Licensee?	Comments
9,217,848		\checkmark	✓	✓	Smith and Nephew	Planning Template

Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of ncing, what you wrote in the submitted work?
Yes, the follow	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
	nuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. rnals may ask authors to disclose further information about reported relationships.
Section 6.	Disclosure Statement
Based on the abo	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
	ts personal fees from Smith and Nephew, outside the submitted work; In addition, Dr. Brooks has a patent by alties paid to Smith and Nephew.

Evaluation and Feedback

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Brooks 3



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Klika 1



Section 1.	Identifying Inform	nation			
1. Given Name (Fi Alison	rst Name)	2. Surname (Last Name) Klika	3. Date 09-August-2019		
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Nicolas Piuzzi		
5. Manuscript Title Do Patient-Repo Arthroplasty?		es (Pain, Function, and Qu	ality of Life) Improve After Aseptic Revision Total Knee		
6. Manuscript Ide	ntifying Number (if you kr	now it)			
Section 2.	The Work Under Co	onsideration for Public	cation		
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					
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Section 4.	Intellectual Proper	ty Patents & Copyrig	ıhts		
Do you have any			oadly relevant to the work? ☐ Yes ✓ No		

Klika 2



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Alison Klika has nothing to disclose.

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Royalties: Funds are coming in to you or your institution due to your patent



Section 1.	Identifying Inform	nation			
1. Given Name (Fil Olivia	rst Name)	2. Surname (Last Name) Krebs		3. Date 26-August-2019	
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Nan Nicolas S. Piuzzi	ne	
5. Manuscript Title Do Patient-Repo Arthroplasty?		res (Pain, Function, and Qu	uality of Life) Improve After <i>F</i>	Aseptic Revision Total Knee	
6. Manuscript Ider	ntifying Number (if you kr	now it)			
Section 2.	The Work Under Co	onsideration for Public	cation		
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Section 3.	Relevant financial	activities outside the s	submitted work.		
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Do you have any			oadly relevant to the work?	☐ Yes 🗸 No	



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Dr. Krebs has nothing to disclose.

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1

administrative support, etc.



Section 1. Id	entifying Inform	ation			
1. Given Name (First N Hiba	ame)	2. Surname (Last Name) Anis		3. Date 09-August-2019	
4. Are you the correspo	onding author?	☐ Yes ✓ No	Corresponding Author's Nam Nicolas S. Piuzzi	ee	
5. Manuscript Title Do Patient-Reported Arthroplasty?	Outcomes Measure	es (Pain, Function, and C	uality of Life) Improve After A	septic Revision Total Knee	
6. Manuscript Identifyi	ng Number (if you kno	ow it)			
Section 2. Th	e Work Under Co	onsideration for Publ	ication		
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Are there any relevant conflicts of interest? Yes Vo					
Section 3. Re	levant financial a	activities outside the	submitted work.		
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Are there any relevant conflicts of interest? Yes V No					
Section 4. Int	tellectual Proper	ty Patents & Copyr	ights		
Do you have any pate	ents, whether planr	ned, pending or issued, k	proadly relevant to the work?	Yes ✓ No	

Anis 2



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Dr. Anis has nothing to disclose.

Evaluation and Feedback

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Anis 3



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Bloomfield 1



Section 1.	Identifying Inform	nation			
1. Given Name (Fii Michael	rst Name)	2. Surname (Last Name) Bloomfield	3. Date 09-August-2019		
4. Are you the cor	responding author?	☐ Yes ✓ No	Corresponding Author's Name Nicolas S Piuzzi		
 5. Manuscript Title Do Patient-Reported Outcomes Measures (Pain, Function, and Quality of Life) Improve After Aseptic Revision Total Knee Arthroplasty? 6. Manuscript Identifying Number (if you know it) 					
Section 2.			_		
_		onsideration for Publi			
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Do you have any	patents, whether plan	ned, pending or issued, bi	roadly relevant to the work? Yes V No		

Bloomfield 2



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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

Briskin 1



Section 1. Identifying Is	nformation				
Given Name (First Name) Isaac	2. Surname (Last Name) Briskin	3. Date 09-August-2019			
4. Are you the corresponding author	? Yes 🗸 No	Corresponding Author's Name Nicolas S. Piuzzi			
5. Manuscript Title Do Patient-Reported Outcomes M Arthroplasty?	Measures (Pain, Function, and Qu	ality of Life) Improve After Aseptic Revision Total Knee			
6. Manuscript Identifying Number (if	you know it)				
Section 2. The Work Un	der Consideration 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 Your					
Section 3. Relevant fina	ncial activities outside the s	ubmitted 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 o	Finterest? Yes ✓ No				
Section 4. Intellectual P	roperty Patents & Copyrig	hts			
Do you have any patents, whether	r planned, pending or issued, br	oadly relevant to the work? Yes V No			

Briskin 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
Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Mr. Briskin has nothing to disclose.

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Briskin 3



Instructions

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Section 1. Identifying Informa	ation			
1. Given Name (First Name) Carlos	2. Surname (Last Name) Higuera		3. Date 09-August-2019	
4. Are you the corresponding author?	Yes ✓ No	Corresponding Auth Nicolas Piuzzi	or's Name	
5. Manuscript Title Do Patient-Reported Outcomes Measure Arthroplasty?	es (Pain, Function, and Q	uality of Life) Improve	e After Aseptic Revision Total Knee	_
6. Manuscript Identifying Number (if you kno	ow it)			
Section 2. The Work Under Co				
The Work Under Co	nsideration for Publ	ication		
Did you or your institution at any time received any aspect of the submitted work (including statistical analysis, etc.)?	but not limited to grants, d			for
Are there any relevant conflicts of interes	st?			
Section 3. Relevant financial a	ctivities outside the	submitted work.		
Place a check in the appropriate boxes in of compensation) with entities as described clicking the "Add +" box. You should report to the second secon	oed in the instructions. U	Jse one line for each e	entity; add as many lines as you need by	
Are there any relevant conflicts of interes				
If yes, please fill out the appropriate info	rmation below.			
Name of Entity	Grant? Personal No	on-Financial Other	Comments	
Name of Littley		Support?	Comments	
Stryker	✓			
KCI	✓		Consulting fees	
Ferring Pharmaceuticals	✓			
CD Diagnostics				
Zimmer Biomet	✓		Consulting fees	
OREF				
Cempra				
Orthofix	✓			



Name of Entity	Grant? Personal Fees?	Non-Financial Support?	Other?	Comments	
Cymedica	✓				
Orthogenics	✓				
Section 4. Intellectual Bronout					
Intellectual Propert	y Patents & Co	pyrights			
Do you have any patents, whether plann	ed, pending or issue	ed, broadly releva	nt to the v	vork? Yes V No	
Section 5. Relationships not c	overed above				
Are there other relationships or activities potentially influencing, what you wrote i Yes, the following relationships/cond No other relationships/conditions/cir At the time of manuscript acceptance, jo On occasion, journals may ask authors to	in the submitted wo ditions/circumstance rcumstances that pro ournals will ask autho	ork? es are present (exp esent a potential of ors to confirm and	olain belov conflict of J, if necess	v): interest ary, update their disclosure st	
Section 6. Disclosure Stateme	nt				
Based on the above disclosures, this form below.	n will automatically	generate a disclos	sure stater	nent, which will appear in the	: box
Dr. Higuera reports grants from Stryker, cD Diagnostics, grants and personal fees Orthofix, grants from Cymedica, grants f	s from Zimmer Biom	net, grants from O	REF, grant	s from Cempra, grants from	its from



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Kamath 1



Section 1. Identifying Inform	ation							
1. Given Name (First Name) Atul	2. Surname (Last Name) Kamath	3. Date 09-August-2019						
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Nicolas S. Piuzzi						
5. Manuscript Title Do Patient-Reported Outcomes Measures (Pain, Function, and Quality of Life) Improve After Aseptic Revision Total Knee Arthroplasty?								
6. Manuscript Identifying Number (if you kn	ow it)							
Section 2. The Work Under Co	onsideration for Public	tation						
		a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,						
Are there any relevant conflicts of intere	st? Yes ✓ No							
Section 3. Relevant financial	activities outside the s	ubmitted work.						
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Are there any relevant conflicts of intere If yes, please fill out the appropriate info								
, 65, produce 6 at the appropriate6								
Name of Entity	Grant? Personal Nor	n-Financial Other? Comments						
ZimmerBiomet		speakers bureau, consulting						
DePuy Synthes		speakers bureau, consulting						
Section 4. Intellectual Proper	ty Patents & Copyrig	jhts						
Do you have any patents, whether plann								

Kamath 2



Section 5. Polationships not sovered 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):
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Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Kamath reports personal fees from ZimmerBiomet, personal fees from DePuy Synthes, outside the submitted work; .

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Kamath 3



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Section 1. Identifying Inform	nation					
1. Given Name (First Name) Viktor	2. Surname (Last Name) Krebs		3. Date 09-August-2019			
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Nam Nicolas S Piuzzi	ne			
5. Manuscript Title Do Patient-Reported Outcomes Measur Arthroplasty?	res (Pain, Function, and Qu	uality of Life) Improve After A	septic Revision Total Knee			
6. Manuscript Identifying Number (if you kr	now it)					
		-				
Section 2. The Work Under Co	onsideration for Public	cation				
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 You						
Section 3. Relevant financial	activities outside the s	submitted work.				
Place a check in the appropriate boxes i of compensation) with entities as descri clicking the "Add +" box. You should rep Are there any relevant conflicts of interes	ibed in the instructions. Us port relationships that wer	se one line for each entity; ad	dd as many lines as you need by			
Section 4. Intellectual Proper	rty Patents & Copyrig	ghts				
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the work?	☐ Yes ✓ No			



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Section 6. Disclosure Statement
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Dr. Krebs has nothing to disclose.

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Molloy 1



Section 1. Identifying Inform	nation					
1. Given Name (First Name) Robert	2. Surname (Last Name) Molloy	3. Date 09-August-2019				
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Nicolas Piuzzi				
5. Manuscript Title Do Patient-Reported Outcomes Measur Arthroplasty?	res (Pain, Function, and Qu	uality of Life) Improve After Aseptic Revision Total Knee				
6. Manuscript Identifying Number (if you kr	now it)	_				
Costion 2						
Section 2. The Work Under Co	onsideration for Public	cation				
any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ita monitoring board, study design, manuscript preparation,				
Section 3. Relevant financial	activities outside the s	submitted work.				
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Name of Entity	Grant? Personal Noi	n-Financial other? Comments				
Stryker	✓	Consulting				
Section 4. Intellectual Proper	rty Patents & Copyric	ghts				
Do you have any patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No				

Molloy 2



Section 5. Relationships not covered above
helationships not covered above
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Dr. Molloy reports grants from Stryker, outside the submitted work; .

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Mont 1



Section 1.	Identifying Inform	ation					
1. Given Name (Fi Michael	rst Name)	2. Surnar Mont	ne (Last Nar	me)		3. Date 23-September-2019	
4. Are you the cor	responding author?	Yes	√ No	Correspond Nicolas S.	_	or's Name	
5. Manuscript Title Do Patient-Repo Arthroplasty?		es (Pain, F	unction, ar	nd Quality of Life)	Improve .	After Aseptic Revision Total Knee	9
6. Manuscript Ider	ntifying Number (if you kn	ow it)					
Section 2.	The Work Under Co	onsiderat	tion for P	ublication			
any aspect of the s statistical analysis,	ubmitted work (including	but not lim		nts, data monitoring		ent, commercial, private foundation, udy design, manuscript preparation,	
Section 3.	Relevant financial a	activities	outside	the submitted	work.		
of compensation clicking the "Add Are there any rel) with entities as descril	bed in the port relation st?	instruction onships that If es	ns. Use one line fo	or each en	ial relationships (regardless of ar atity; add as many lines as you ne • 36 months prior to publicatio	ed by
Name of Entity		Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments	
CyMedica			✓				
Flexion Therapeutics			✓				
DJ Orthopaedics			✓				
Johnson and Johnson	า		✓				
Ongoing Care Solution	ons		✓				
Orthosensor			✓				
Pacira			√				
Peerwell			✓				

Mont 2



Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Performance Dynamics		✓			
Pfizer		✓			
Stryker		√			
Skye Biologics		✓			
TissueGene		✓			
US Medical Innovations			\checkmark		
Section 4. Intellectual Proper	ty Pate	ents & Co	pyrights		
Do you have any patents, whether plans	ned, pend	ing or issue	ed, broadly releva	int 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/ci	rcumstan	ces that pre	esent 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. Mont reports personal fees from CyMedica, personal fees from Flexion Therapeutics, personal fees from DJ Orthopaedics, personal fees from Johnson and Johnson, personal fees from Ongoing Care Solutions, personal fees from Orthosensor, personal fees from Pacira, personal fees from Peerwell, personal fees from Performance Dynamics, personal fees from Pfizer, personal fees from Stryker, personal fees from Skye Biologics, personal fees from TissueGene, non-financial					

Mont 3

support from US Medical Innovations, outside the submitted work; .



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Mont 4



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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

Murray 1



Section 1. Identifyi	ng Information				
1. Given Name (First Name) Trevor	2. Surname (Last Name) Murray	3. Date 09-August-2019			
4. Are you the corresponding a		Corresponding Author's Name Nicolas Piuzzi			
Manuscript TitleDo Patient-Reported Outcon Arthroplasty?	Do Patient-Reported Outcomes Measures (Pain, Function, and Quality of Life) Improve After Aseptic Revision Total Knee				
6. Manuscript Identifying Numb	er (if you know it)				
Section 2. The Work	Under Consideration for Publicat	ion			
	k (including but not limited to grants, data	hird party (government, commercial, private foundation, etc.) for monitoring board, study design, manuscript preparation,			
Section 3. Relevant	financial activities outside the sul	omitted work.			
of compensation) with entitie	es as described in the instructions. Use of should report relationships that were parts of interest?	ner you have financial relationships (regardless of amount one line for each entity; add as many lines as you need by present during the 36 months prior to publication.			
Name of Entity	Grant? Personal Non-F	inancial Other? Comments			
Zimmer Biomet					
Section 4. Intellectu	al Property Patents & Copyrigh	ts			
Do you have any patents, wh	ether planned, pending or issued, broa	dly relevant to the work? ☐ Yes ✓ No			

Murray 2



Section 5. Polationships 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
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Section 6. Disclosure Statement
Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Murray reports personal fees from Zimmer Biomet, outside the submitted work; .

Evaluation and Feedback

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Murray 3



Instructions

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Royalties: Funds are coming in to you or your institution due to your patent

Muschler 1



Section 1.	Identifying Inform	ation		
1. Given Name (Fi George	rst Name)	2. Surname (Last Name) Muschler		Date -September-2019
4. Are you the cor	e corresponding author? Yes V		Corresponding Author's Name Nicolas S. Piuzzi	
	5. Manuscript Title Do Patient-Reported Outcomes Measures (Pain, Function, and Quality of Life) Improve After Aseptic Revision Total Knee Arthroplasty?			
6. Manuscript Ider	ntifying Number (if you kn	now it)	_	
	l			
Section 2.	The Work Under Co	onsideration for Public	ation	
any aspect of the s statistical analysis,	ubmitted work (including	but not limited to grants, da	a third party (government, comme ta monitoring board, study design	ercial, private foundation, etc.) for n, manuscript preparation,
	ı			
Section 3.	Relevant financial	activities outside the s	ubmitted work.	
of compensation clicking the "Add) with entities as descri	bed in the instructions. Us port relationships that wer	ether you have financial relatio e one line for each entity; add a e present during the 36 mon t	as many lines as you need by
	l			
Section 4.	Intellectual Proper	ty Patents & Copyric	ıhts	
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work?	Yes ✓ No

Muschler 2



Section 5. Relationships not severed above
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Section 6. Disclosure Statement
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Dr. Muschler has nothing to disclose.

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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

Krebs 1



Section 1.	dentifying Informa	ntion				
1. Given Name (First Olivia	Name)	2. Surname (Last Name) Krebs		3. Date 26-August-2019		
4. Are you the corres	ponding author?	☐ Yes ✓ No	Corresponding Author's Nar Nicolas S. Piuzzi	me		
5. Manuscript Title Do Patient-Reporte Arthroplasty?	Do Patient-Reported Outcomes Measures (Pain, Function, and Quality of Life) Improve After Aseptic Revision Total Knee					
6. Manuscript Identif	ying Number (if you kno	w it)				
			_			
Section 2. T	he Work Under Co	nsideration for Public	cation			
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 Volume Yes						
Section 2						
Section 3.	elevant financial a	ctivities outside the s	submitted work.			
of compensation) w clicking the "Add +'	vith entities as describ " box. You should repo	ed in the instructions. Us ort relationships that wer	se one line for each entity; a	ationships (regardless of amount add as many lines as you need by nonths prior to publication.		
Are there any releva	ant conflicts of interes	t? Yes ✓ No				
Section 4.	ntellectual Property	y Patents & Copyric	yhts			
Do you have any pa	atents, whether planne	ed, pending or issued, br	oadly relevant to the work?	Yes 🗸 No		

Krebs 2



Section 5.	Bulleting discount account delices			
	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 follow	ving relationships/conditions/circumstances are present (explain below):			
✓ No other relat	cionships/conditions/circumstances that present a potential conflict of interest			
	nuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. nals may ask authors to disclose further information about reported relationships.			
Section 6.	Disclosure Statement			
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Piuzzi 1



Section 1.	Identifying Inform	ation			
1. Given Name (Fi Nicolas	rst Name)	2. Surnan Piuzzi	ne (Last Name)	3. Date 09-August-2019	
4. Are you the cor	responding author?	✓ Yes	No		
 5. Manuscript Title Do Patient-Reported Outcomes Measures (Pain, Function, and Quality of Life) Improve After Aseptic Revision Total Knee Arthroplasty? 6. Manuscript Identifying Number (if you know it) 					
Section 2.	The Work Under Co	onsiderat	tion 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 Vo					
Section 3.	Relevant financial	activities	outside the submitted work.		
of compensation clicking the "Add	ı) with entities as descri	bed in the port relatio	e to indicate whether you have financia instructions. Use one line for each entionships that were present during the 3 Yes	ty; add as many lines as you need by	
Section 4.	Intellectual Proper	ty Pate	ents & Copyrights		
Do you have any	patents, whether plan	ned, pendi	ing or issued, broadly relevant to the w	ork? ☐ Yes ✓ No	

Piuzzi 2



Section 5. Relationships not covered above
Relationships not covered above
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Section 6. Disalogues Statement
Disclosure Statement
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Dr. Piuzzi has nothing to disclose.

Evaluation and Feedback

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Piuzzi 3



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Schaffer 1



Section 1.	Identifying Inform	nation				
1. Given Name (Fi Jonathan	rst Name)	2. Surname (Last Name) Schaffer		3. Date 09-August-2019		
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Nan Nicolas Piuzzi	ne		
	5. Manuscript Title Do Patient-Reported Outcomes Measures (Pain, Function, and Quality of Life) Improve After Aseptic Revision Total Knee Arthroplasty?					
6. Manuscript Idei	Manuscript Identifying Number (if you know it)					
			_			
Section 2.	The Work Under Co	onsideration for Publi	cation			
any aspect of the s statistical analysis,	ubmitted work (including	but not limited to grants, do	a third party (government, con ata monitoring board, study des	mmercial, private foundation, etc.) for sign, manuscript preparation,		
Section 3.	Relevant financial	activities outside the	submitted work.			
of compensation clicking the "Add	the appropriate boxes i) with entities as descri	n the table to indicate wh bed in the instructions. U port relationships that we	ether you have financial rela se one line for each entity; ac	ationships (regardless of amount dd as many lines as you need by conths prior to publication.		
Section 4.	Intellectual Proper	rty Patents & Copyri	ahts			
Do you have any	patents, whether plan	ned, pending or issued, b	roadly relevant to the work?	Yes ✓ No		

Schaffer 2



Section 5. Relationships not covered above
Relationships not covered above
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Dr. Schaffer has nothing to disclose.

Evaluation and Feedback

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Schaffer 3



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Royalties: Funds are coming in to you or your institution due to your patent

Siddiqi 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi Ahmed	ne (First Name) 2. Surname (Last Name) Siddiqi		3. Date 09-August-2019
4. Are you the cor	orresponding author? Yes V		Corresponding Author's Name Nicolas S. Piuzzi
5. Manuscript Title Do Patient-Reported Outcomes Measures (Pain, Function, and Quality of Life) Improve After Aseptic Revision Total Knee Arthroplasty? 6. Manuscript Identifying Number (if you know it)			
			-
Section 2.	The Work Under Co	onsideration for Public	cation
any aspect of the s statistical analysis,	ubmitted work (including	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ita monitoring board, study design, manuscript preparation,
Section 3.	Relevant financial	activities outside the s	submitted work.
of compensation clicking the "Add Are there any rel	ı) with entities as descri	ibed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication.
Section 4.	Intellectual Proper	rty Patents & Copyric	ghts
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No

Siddiqi 2



Section 5. Relationships not sovered 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):
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Section 6. Disclosure Statement
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Dr. Siddiqi has nothing to disclose.

Evaluation and Feedback

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Siddiqi 3



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Royalties: Funds are coming in to you or your institution due to your patent

Stearns 1



Section 1. Identifying Info	ormation			
1. Given Name (First Name) Kim	2. Surname (Last Name) Stearns	3. Date 12-September-2019		
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Nicolas S. Piuzzi		
5. Manuscript Title Do Patient-Reported Outcomes Me Arthroplasty?	asures (Pain, Function, and Qu	uality of Life) Improve After Aseptic Revision Total Knee		
6. Manuscript Identifying Number (if yo	ou know it)			
Section 2. The Work Unde	r Consideration for Publi	cation		
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 Volume				
Section 3. Relevant finance	ial activities outside the	submitted work.		
of compensation) with entities as de	escribed in the instructions. Used report relations his that we	nether you have financial relationships (regardless of amount see one line for each entity; add as many lines as you need by the present during the 36 months prior to publication.		
Section 4. Intellectual Pro	perty Patents & Copyri	ghts		
Do you have any patents, whether p	olanned, pending or issued, b	roadly relevant to the work? Yes V No		

Stearns 2



Section 5. Relationships not severed above
Relationships not covered above
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Yes, the following relationships/conditions/circumstances are present (explain below):
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Disclosure Statement
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Stearns 3



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Suarez 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi	rst Name)	2. Surname (Last Name) Suarez	3. Date 09-August-2019	
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Nicolas Piuzzi	
5. Manuscript Title Do Patient-Repo Arthroplasty?		res (Pain, Function, and C	Quality of Life) Improve After Aseptic Revision Total Knee	_
6. Manuscript Ider	ntifying Number (if you kr	now it)		
Section 2.	The Work Under C	onsideration for Pub	lication	
any aspect of the s statistical analysis,	ubmitted work (including	g but not limited to grants, o	om a third party (government, commercial, private foundation, etc.) f data monitoring board, study design, manuscript preparation,	for
The there any re-	evant connect of interv	in the wind		
Section 3.	Relevant financial	activities outside the	e submitted work.	
of compensation clicking the "Add	the appropriate boxes (a) with entities as descr +" box. You should re	in the table to indicate w ibed in the instructions. I port relationships that w	whether you have financial relationships (regardless of amoun Use one line for each entity; add as many lines as you need by were present during the 36 months prior to publication .	
	evant conflicts of intere out the appropriate info			
Name of Entity		Grant	on-Financial Other? Comments	
Corin USA			Royalties	
Depuy			Consultant	
Section 4.	Intellectual Proper	rty Patents & Copyr	rights	
Do you have any	patents, whether plan	ned, pending or issued, l	broadly relevant to the work? Yes V No	

Suarez 2



Section 5. Polationships not severed above
Relationships not covered above
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Dr. Suarez reports other from Corin USA, other from Depuy, outside the submitted work; .

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Suarez 3



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patent

Warren 1



Section 1. Identifying Inform	nation			
1. Given Name (First Name) Jared	2. Surname (Last Name) Warren		Date 9-August-2019	
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Nicolas S. Piuzzi		
5. Manuscript Title Do Patient-Reported Outcomes Measur Arthroplasty?	res (Pain, Function, and Qu	ıality of Life) Improve After Ase	eptic Revision Total Knee	
6. Manuscript Identifying Number (if you kr	now it)			
		_		
Section 2. The Work Under Co	onsideration for Public	cation		
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Are there any relevant conflicts of interest?				
Section 3. Relevant financial	activities outside the s	submitted work.		
Place a check in the appropriate boxes i of compensation) with entities as descri clicking the "Add +" box. You should rep	ibed in the instructions. Us	se one line for each entity; add	as many lines as you need by	
Are there any relevant conflicts of interes	est? Yes ✓ No	,		
Section 4. Intellectual Proper	rty Patents & Copyri	ghts		
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the work?	Yes ✓ No	

Warren 2



Section 5.				
Section 5.	Relationships not covered above			
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Section 6.	Disclosure Statement			
Based on the abo	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box			
Dr. Warren has r	nothing to disclose.			

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Warren 3



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Strnad 1



Section 1.	Identifying Inform	nation		
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4. Are you the cor	responding author?	Yes No Corresponding Author's Name Nicolas Piuzzi		or's Name
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Section 4.	Intellectual Drope	rty Patents & Copyri	whée.	
	•			
Do you have any	patents, whether plan	ned, pending or issued, b	oadly relevant to the	work? Yes Vo

Strnad 2



Section 5. Relationships not covered above
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Strnad 3