

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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#### 1. Identifying information.

#### 2. The work under consideration for publication.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Paul

2. Surname (Last Name)  
Butler

3. Date  
28-March-2016

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name  
Alexander Sawatzke

5. Manuscript Title  
Rim Fracture of Tibial Base Plate Due to Retained Cement as a Cause of Catastrophic Failure of Unicompartamental Knee Arthroplasty: A Case Report

6. Manuscript Identifying Number (if you know it)

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

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Dr. Butler has nothing to disclose.

### 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)  
Alexander

2. Surname (Last Name)  
Bollinger

3. Date  
22-December-2015

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name  
Alexander Sawatzke

5. Manuscript Title  
Rim Fracture of Tibial Base Plate due to Retained Cement as a Cause of Catastrophic Failure of Unicompartamental Knee Arthroplasty: A Case Report

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1. Given Name (First Name)  
Alexander

2. Surname (Last Name)  
Sawatzke

3. Date  
11-November-2014

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

5. Manuscript Title  
Rim Fracture of Tibial Base Plate due to Retained Cement as a Cause of Catastrophic Failure of Unicompartmental Knee Arthroplasty

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I have no disclosures

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### Section 1. Identifying Information

1. Given Name (First Name)  
Karl

2. Surname (Last Name)  
Roberts

3. Date  
22-December-2015

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name  
Alexander B. Sawatzke

5. Manuscript Title  
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