

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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4. Intellectual Property.

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

5. Relationships not covered above.

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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) Norman	2. Surname (Last Name) Boardman	3. Date 04-November-2016
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Clarence Brian Toney
5. Manuscript Title Conversion of glenohumeral fusion to reverse total shoulder arthroplasty		
6. Manuscript Identifying Number (if you know it) CC-D-16-00029		

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.

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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
Depuy Synthes	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
ZimmerBiomet speakers Bureau	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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. Boardman reports personal fees from Depuy Synthes , personal fees from ZimmerBiomet speakers Bureau, outside the submitted work; .

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)
Brandon

2. Surname (Last Name)
Barnes

3. Date
06-April-2016

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Clarence Brian Toney

5. Manuscript Title
Conversion of glenohumeral fusion to reverse total shoulder arthroplasty

6. Manuscript Identifying Number (if you know it)
CC-D-16-00029

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Dr. Barnes has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Matthew

2. Surname (Last Name)

Thompson

3. Date

08-February-2016

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name

Clarence Brian Toney

5. Manuscript Title

Conversion of glenohumeral fusion to reverse total shoulder arthroplasty

6. Manuscript Identifying Number (if you know it)

CC-D-16-00029

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Clarence

2. Surname (Last Name)
Toney

3. Date
08-February-2016

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