

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.

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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



Section 1. Identifying Inform		
Identifying Inform	nation	
1. Given Name (First Name) Conor	2. Surname (Last Name) McCarthy	3. Date 23-April-2018
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Name R Justin Mistovich
5. Manuscript Title Median Nerve Entrapment in a Pediatr	ic Medial Condyle Fracture	e: Case Report and Type V Median Nerve Entrapment
6. Manuscript Identifying Number (if you k	now it)	
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Section 2. The Work Under C		
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Section 3. Relevant financial	l activities outside the	submitted work
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of compensation) with entities as desc	ribed in the instructions. U	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	

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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Conor McCarthy has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Inform	ation				
1. Given Name (First Name) James	2. Surname (Last Name) Kyriakedes	3. Date 24-April-2018			
4. Are you the corresponding author?	Yes 🗸 No	Corresponding Author's Name Justin Mistovich			
5. Manuscript Title Median Nerve Entrapment in a Pediatric	: Medial Condyle Fracture	: Case Report and Type V Median Nerve Entrapment			
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Section 2. The Work Under Co					
	onsideration for Publi				
any aspect of the submitted work (including		a third party (government, commercial, private foundation, etc.) for ata 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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Dr. Kyriakedes has nothing to disclose.

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1. Given Name (First Name) R Justin	2. Surname (Last Name) Mistovich	3. Date 24-June-2018
4. Are you the corresponding author?	✓ Yes No	
5. Manuscript Title Median Nerve Entrapment in a Pediat	ric Medial Condyle Fracture: Case Report	t and Type V Median Nerve Entrapment

6. Manuscript Identifying Number (if you know it)

18-00168

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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.)?

✓ No

Are there any relevant conflicts of interest? Yes

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No

Are there any relevant conflicts of interest? \checkmark Yes

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees ?	Non-Financial Support?	Other?	Comments	
OrthoPediatrics				\checkmark	Paid Consultant	
Right Mechanics				\checkmark	Stock Options	

Section 4.

Intellectual Property -- Patents & Copyrights

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Dr. Mistovich reports other from OrthoPediatrics, other from Right Mechanics, outside the submitted work; .

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