

#### **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.

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

Berthiaume 1



Section 1.	Identifying Inform	nation	
1. Given Name (First Name) Emily		2. Surname (Last Name) Berthiaume	3. Date 08-October-2018
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name  David Kulber, MD
5. Manuscript Title Surgical Repair o		xor Carpi Radialis Tendon i	n a Boxer: A Case Report
6. Manuscript Ider CC-D-17-00211R	ntifying Number (if you kr 1	now it)	
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Section 2.	The Work Under C	onsideration for Public	cation
any aspect of the s statistical analysis,	ubmitted work (including	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta 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	) 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 Prope	rty Patents & Copyric	ghts
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No

Berthiaume 2



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Disclosure statement
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Ms. Berthiaume has nothing to disclose.

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Cohen 1



Section 1. Identifying Inform	nation			
1. Given Name (First Name) Myles	2. Surname (Last Name) Cohen		3. Date 08-October-2018	
4. Are you the corresponding author?			Corresponding Author's Name David Kulber, MD	
5. Manuscript Title Surgical Repair of an Avulsed Distal Flex	xor Carpi Radialis Tendon i	n a Boxer: A Case Report		
6. Manuscript Identifying Number (if you kr CC-D-17-00211R1	now it)			
		_		
Section 2. The Work Under Co	onsideration for Public	cation		
Did you or your institution <b>at any time</b> rece any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	g but not limited to grants, da			
Section 3. Relevant financial	activities outside the s	submitted work.		
Place a check in the appropriate boxes in of compensation) with entities as described clicking the "Add +" box. You should repart there any relevant conflicts of interest.	ibed in the instructions. Us port relationships that wer	se one line for each entity; a	dd as many lines as you need by	
Continue A				
Section 4. Intellectual Proper	rty Patents & Copyric	yhts		
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the work?	☐ Yes 🗸 No	

Cohen 2



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Dr. Cohen has nothing to disclose.

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Hagopian 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fir Thomas	rst Name)	2. Surname (Last Name) Hagopian	3. Date 08-October-2018
4. Are you the cor	4. Are you the corresponding author?		Corresponding Author's Name  David Kulber, MD
5. Manuscript Title Surgical Repair o		kor Carpi Radialis Tendon i	n a Boxer: A Case Report
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Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No

Hagopian 2



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Dr. Hagopian has nothing to disclose.

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Kulber 1



Section 1. Ider	ntifying Information			
1. Given Name (First Nam David	ne) 2. Surna Kulber	ame (Last Name)		3. Date 08-October-2018
4. Are you the correspon	ding author? Yes	No		
5. Manuscript Title Surgical Repair of an A	vulsed Distal Flexor Carpi	Radialis Tendon in a Boxer: A	A Case Report	
6. Manuscript Identifying CC-D-17-00211R1	Number (if you know it)			
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Section 3. Rele	vant financial activitie	es outside the submitted	work.	
of compensation) with clicking the "Add +" bo Are there any relevant	entities as described in th x. You should report relati	e instructions. Use one line f	or each entity; a	ationships (regardless of amount odd as many lines as you need by nonths prior to publication.
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Do you have any paten	its, whether planned, pend	ding or issued, broadly releva	ant to the work?	Yes 🗸 No

Kulber 2



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Millstein 1



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4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name  David Kulber, MD
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Millstein 2



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