

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.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

3. Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

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

patent

Seeley 1



Section 1.	Identifying Inform	ation				
1. Given Name (First Name) Mark		2. Surname (Last Name) Seeley		3. Date 25-May-2018		
4. Are you the corresponding author?		✓ Yes No				
	5. Manuscript Title Iatrogenic Hip Instability after Hip Arthroscopy: Is there a role for Open Capsular Reconstruction?					
6. Manuscript Identifying Number (if you know it)						
Section 2.	The Work Under C	onsideration for Pu	blication			
any aspect of the s statistical analysis,	stitution at any time rece ubmitted work (including	ive payment or services f but not limited to grant	rom a third party (government, co s, data monitoring board, study de	mmercial, private foundation, etc.) for esign, manuscript preparation,		
Section 3.	Relevant financial	activities outside t	he submitted work.			
of compensation clicking the "Add) with entities as descri	bed in the instructions oort relationships that	s. Use one line for each entity; a were present during the 36 m	lationships (regardless of amount add as many lines as you need by nonths prior to publication.		
Section 4.	Intellectual Proper	rty Patents & Cop	vrights			
Do you have any			d, broadly relevant to the work?	? ☐ Yes ✓ No		

Seeley 2



Section 5.			
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	anuscript 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 below.	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box		

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.

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Cornell 1



Section 1.	Identifying Inform	nation	
1. Given Name (First Name) Max		2. Surname (Last Name) Cornell	3. Date 12-July-2018
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Dr. Mark Seeley
5. Manuscript Title latrogenic Hip Instability after Hip Arthroscopy: Is there a role for O		roscopy: Is there a role for	Open Capsular Reconstruction?
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Do you have any			oadly relevant to the work? Yes V No

Cornell 2



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Dr. Cornell has n	nothing to disclose.		

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Gehrman 1



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