

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name)

Mahmoud

2. Surname (Last Name)

Ben Maitigue

3. Date

29-March-2019

4. Are you the corresponding author?

☐ Yes☒ No

Corresponding Author's Name

Karim Masmoudi

5. Manuscript Title

BIPOLAR LOOSENING OF A TOTAL HIP ARTHROPLASTY ASSOCIATED WITH A PERI-PROSTHETIC FEMORAL FRACTURE CAUSED BY A RECURRENT HYDATIDOSIS OF THE HIP: A CASE REPORT

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Section 1. Identifying Information

1. Given Name (First Name) Hassen	2. Surname (Last Name) Cheikhrouhou	3. Date 14-March-2019
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Karim Masmoudi
5. Manuscript Title BIPOLAR LOOSENING OF A TOTAL HIP ARTHROPLASTY ASSOCIATED WITH A PERI-PROSTHETIC FEMORAL FRACTURE CAUSED BY A RECURRENT HYDATIDOSIS OF THE HIP: A CASE REPORT		
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Riadh

2. Surname (Last Name)

Frikha

3. Date

29-March-2019

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Karim Masmoudi

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1. Given Name (First Name) thabet	2. Surname (Last Name) mouelhi	3. Date 28-March-2019
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1. Given Name (First Name)
Karim

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Masmoudi

3. Date
09-April-2018

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