

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Aditya

2. Surname (Last Name)
Kekatpure

3. Date
04-May-2016

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Pil Whan Yoon

5. Manuscript Title

Arthroscopic excision of solitary acetabular osteochondroma in an Adult : A case report

6. Manuscript Identifying Number (if you know it)

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Dr. Kekatpure has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Anuja

2. Surname (Last Name)

Kashikar

3. Date

06-May-2016

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Pil Whan Yoon

5. Manuscript Title

Arthroscopic excision of solitary acetabular osteochondroma in an Adult : A case report

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Dr. Kashikar has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Jae Suk

2. Surname (Last Name)

Chang

3. Date

04-May-2016

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Pil Whan Yoon

5. Manuscript Title

Arthroscopic excision of solitary acetabular osteochondroma in an Adult : A case report

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Dr. Chang has nothing to disclose.

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1. Given Name (First Name)

Mi Yeon

2. Surname (Last Name)

Jeong

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04-May-2016

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☐ Yes

☒ No

Corresponding Author's Name

Pil Whan Yoon

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Chul-Ho

2. Surname (Last Name)

Kim

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04-May-2016

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Corresponding Author's Name

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Pending: The patent has been filed but not issued

Issued: The patent has been issued by the agency

Licensed: The patent has been licensed to an entity, whether earning royalties or not

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)

Pil Whan

2. Surname (Last Name)

Yoon

3. Date

04-May-2016

4. Are you the corresponding author?



Yes



No

5. Manuscript Title

Arthroscopic excision of solitary acetabular osteochondroma in an Adult : A case report

6. Manuscript Identifying Number (if you know it)

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?



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No

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Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were **present during the 36 months prior to publication**.

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Yes



No

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Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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Dr. Yoon has nothing to disclose.

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