

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.

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.

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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



Section 1. Identifying Infor	mation	
1. Given Name (First Name) Matthew	2. Surname (Last Name) Herring	3. Date 29-September-2018
4. Are you the corresponding author?	✓ Yes No	
5. Manuscript Title Open reduction, bone grafting, and in	ternal fixation of osteochondritis dessic	cans lesion of the knee.
6. Manuscript Identifying Number (if you l	know it)	
Section 2. The Work Under (Consideration for Publication	
	ng but not limited to grants, data monitoring	(government, commercial, private foundation, etc.) for g board, study design, manuscript preparation,
Are there any relevant connects of inte		
Section 3. Relevant financia	l activities outside the submitted	work.
of compensation) with entities as desc	ribed in the instructions. Use one line fo	ave financial relationships (regardless of amount or each entity; add as many lines as you need by l uring the 36 months prior to publication .

Are there any relevant conflicts of interest? \Box Yes \checkmark No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? $\; [$	Yes	I V No	
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Section 6. Disclosure Statement

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Dr. Herring has nothing to disclose.

Evaluation and Feedback

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



1. Given Name (First Name) Michael	2. Surname (Last Name Knudsen) 3. Date 28-March-2
 Are you the corresponding author? Manuscript Title Open reduction, bone grafting, an 	Yes ✓ No	Corresponding Author's Name Matthew Herring nondritis dessicans lesion of the knee
6. Manuscript Identifying Number (if y ST-D-18-00035R1	ou know it)	

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.)?

🖌 No

Are there any re	levant confl	icts of inte	rest?	Yes
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Do you have any patents, whether pla	ned, pending or issued, broad	v relevant to the work?	Yes	✓ No
		,		



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1. Given Name (First Name) 2. Surname (Last Name) Jeffrey Macalena 4. Are you the corresponding author? ✓ Yes	3. Date 03-October-2018
4. Are you the corresponding author? Yes No	
5. Manuscript Title Open reduction, bone grafting, and internal fixation of osteochondritis dessicans lesion	n of the knee

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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	
Arthrex				\checkmark	Speaker	
Smith and Nephew				\checkmark	Speaker	
Vericel				\checkmark	Speaker	

Section 4.

Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Ves



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Dr. Macalena reports other from Arthrex, other from Smith and Nephew, other from Vericel, outside the submitted work; .

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