

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name) Tom	2. Surname (Last Name) Gocke	3. Date 27-November-2019
4. Are you the corresponding author? ☐ Yes ☒ No		Corresponding Author's Name Dagan Cloutier
5. Manuscript Title Hand Roundtable: Finger Infections		
6. Manuscript Identifying Number (if you know it) 		

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1. Given Name (First Name) Michael	2. Surname (Last Name) Harris	3. Date 27-November-2019
4. Are you the corresponding author? ☐ Yes ☒ No		Corresponding Author's Name Dagan Cloutier
5. Manuscript Title Hand Roundtable: Finger Infections		
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1. Given Name (First Name) Natanya	2. Surname (Last Name) McDonough	3. Date 27-November-2019
4. Are you the corresponding author? ☐ Yes ☒ No		Corresponding Author's Name Dagan Cloutier
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2. Surname (Last Name)
Cloutier

3. Date
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