

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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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)
Dagan

2. Surname (Last Name)
Cloutier

3. Date
05-April-2018

4. Are you the corresponding author? ☒ Yes ☐ No

5. Manuscript Title
Sports Medicine Roundtable: Graft selection for anterior cruciate ligament reconstruction

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Mr. Cloutier has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Larry	2. Surname (Last Name) Collins	3. Date 05-April-2018
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Dagan Cloutier
5. Manuscript Title Sports Medicine Roundtable: Graft selection for anterior cruciate ligament reconstruction		
6. Manuscript Identifying Number (if you know it) 		

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Mr. Collins has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Charles

2. Surname (Last Name)
Dowell

3. Date
05-April-2018

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name
Dagan Cloutier

5. Manuscript Title
Sports Medicine Roundtable: Graft selection for anterior cruciate ligament reconstruction

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1. Given Name (First Name)
Brian

2. Surname (Last Name)
Downie

3. Date
05-April-2018

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Dagan Cloutier

5. Manuscript Title
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Sean

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Hazzard

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05-April-2018

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☐ Yes ☒ No

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Dagan Cloutier

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