

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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### Section 1. Identifying Information

1. Given Name (First Name)  
Michael

2. Surname (Last Name)  
Harris

3. Date  
03-December-2018

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name  
Dagan Cloutier

5. Manuscript Title  
Hand Roundtable: Distal Biceps Tendon Injury

6. Manuscript Identifying Number (if you know it)

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Mallory

2. Surname (Last Name)

Pingeton

3. Date

03-December-2018

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☐ Yes

☒ No

Corresponding Author's Name

Dagan Cloutier

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|----------------------------------------------------------------------------------------------------------|---------------------------------|-----------------------------------------------|
| 1. Given Name (First Name)<br>keith                                                                      | 2. Surname (Last Name)<br>Lemay | 3. Date<br>03-December-2018                   |
| 4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |                                 | Corresponding Author's Name<br>Dagan Cloutier |
| 5. Manuscript Title<br>Hand Roundtable: Distal Biceps Tendon Injury                                      |                                 |                                               |
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Natanya

2. Surname (Last Name)  
McDonough

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03-December-2018

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Dagan Cloutier

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Dagan

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Cloutier

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