

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.

Identifying information.

2. The work under consideration for publication.

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Other: Anything not covered under the previous three boxes

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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



Section 1.	Identifying Inform	nation				
1. Given Name (Firs Dinesh	1. Given Name (First Name) Dinesh		ne)		3. Date 15-January-2017	
4. Are you the corresponding author?		Yes No Corresponding Author's Name of the			me	
5. Manuscript Title "Partial Resurfacir	ng of the Knee with Bi	opoly-Interim Report	to 2 Years"			
6. Manuscript Ident JBJSOA-D-16-000	ifying Number (if you kr 11R1	now it)				
Section 2.	The Work Under C	onsideration for P	ublication			
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? Yes No						
•	If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row.					
Excess rows can be removed by pressing the "X" button.						
Name of Institution	on/Company	Grant? Personal Fees?	Non-Financial Support?	Other? Cor	nments	
Biopoly LLC				costs visitin educa	ultancy agreement, lecturing inc travel and study panel, ag surgeon program for ation. No financial lensation for participation in the .	
Section 3.	Relevant financial	activities outside	the submitted	work.		
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 . Are there any relevant conflicts of interest? Ves No						
•	If yes, please fill out the appropriate information below.					



Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Biopoly LLC		✓			Surgeon design panel for patella and trochlear biopoly implants. No funds or royalties related to implantation of device in submitted work.
Section 4. Intellectual Dispose					
Intellectual Propert	y Pate	ents & Co _l	pyrights		
Do you have any patents, whether plann	ed, pend	ing or issue	ed, broadly releva	nt to the	work? Yes V No
Section 5. Polationships not a					
Relationships not c	overed	above			
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?					
Yes, the following relationships/cond	litions/cir	cumstance	es are present (exp	olain belo	w):
✓ No other relationships/conditions/cir	cumstan	ces that pre	esent a potential o	conflict o	finterest
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.					
Section 6. Disclosure Stateme					
Disclosure Statement					
Based on the above disclosures, this form below.	n will auto	omatically (generate a disclos	sure state	ment, which will appear in the box
Dr. Nathwani reports personal fees from Biopoly LLC, during the conduct of the study; personal fees from Biopoly LLC, outside the submitted work; .					



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miles



Section 1.	Identifying Inform	nation			
1. Given Name (Fir	ne (First Name) 2. Surname (Last Name) miles		3. Date 23-January-2017		
4. Are you the corr	rou the corresponding author? Yes V		Corresponding Author's Name vladimir bobic		
5. Manuscript Title Partial Resurfacir	e ng of the Knee with Bio	Poly®			
6. Manuscript Ider JBJS-D-16-01097	ntifying Number (if you kr	now it)			
Section 2.	The Work Under Co	onsideration for Public	cation		
any aspect of the s statistical analysis,	ubmitted work (including	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,		
Section 3.	Relevant financial	activities outside the s	submitted work.		
of compensation clicking the "Add) with entities as descri	ibed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication .		
Section 4.	Intellectual Proper	rty Patents & Copyric	ghts		
Do you have any	patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No		

miles 2



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Section 6. Disclosure Statement
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Dr. miles has nothing to disclose.

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Section 1. Identifying Inform	nation				
1. Given Name (First Name) Mike	2. Surname (Last Name) McNicholas		3. Date 24-January-2017		
4. Are you the corresponding author?	☐ Yes ✓ No	Yes ✓ No Corresponding Author's Name Mr Vladimir Bobic			
5. Manuscript Title Partial Resurfacing of the Knee with Biopoly-Interim Report to 2 Years					
6. Manuscript Identifying Number (if you ki JBJSOA-D-16-00011R1	now it)	_			
Section 2. The Work Under C	onsideration for Publi				
Did you or your institution at any time receany aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of inter lf yes, please fill out the appropriate inferences rows can be removed by pressing the submitted of the submitted in the submitted work (including statistical analysis, etc.)?	g but not limited to grants, doest? Yes No ormation below. If you have	ata monitoring board, st	tudy design, manuscript preparation,		
Name of Institution/Company	Grant	n-Financial Other?	Comments		
iopoly LLC			Consultancy agreement, lecturing costs inc travel and study panel, visiting surgeon program for education. No financial compensation for participation in the study.		
Section 3. Relevant financial	activities outside the	submitted work.			
Place a check in the appropriate boxes of compensation) with entities as descr clicking the "Add +" box. You should re	ibed in the instructions. U	se one line for each e	ntity; add as many lines as you need by		
Are there any relevant conflicts of interest? Yes No If yes, please fill out the appropriate information below.					



Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Biopoly LLC		✓			Surgeon design panel for trochlear biopoly implants. No funds or royalties related to implantation of device in submitted work.
Continu A					
Section 4. Intellectual Propert	y Pate	ents & Co _l	pyrights		
Do you have any patents, whether plann	ed, pend	ing or issue	ed, broadly releva	nt to the	work? Yes V No
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Based on the above disclosures, this form below.	n will auto	omatically	generate a disclos	sure state	ment, which will appear in the box
Dr. McNicholas reports personal fees from Biopoly LLC, during the conduct of the study; personal fees from Biopoly LLC, outside the submitted work; .					



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Hart 1



Section 1.	Identifying Inform	nation						
1. Given Name (Fir Alister	iven Name (First Name) 2. Surr ter Hart		3. Date 24-January-2017					
4. Are you the corr	u the corresponding author? Yes Vo		Corresponding Author's Name Vladimir Bobic					
		Poly® – Interim Report to 2 poly	Years					
	ntifying Number (if you kn	•						
			-					
Section 2.	Section 2. The Work Under Consideration for Publication							
any aspect of the si statistical analysis,	titution at any time recei ubmitted work (including	ive payment or services from but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,					
Section 3.	Relevant financial	activities outside the s	ubmitted work					
of compensation clicking the "Add	he appropriate boxes i) with entities as descri	n the table to indicate who bed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amount e one line for each entity; add as many lines as you need by e present during the 36 months prior to publication.					
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Hart 2



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Dr. Hart has nothing to disclose.

Evaluation and Feedback

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Hart 3



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Bobic 1



Section 1.	Identifying Inform	nation					
1. Given Name (Fi Vladimir	rst Name)	3. Date 16-January-2017					
4. Are you the cor	e corresponding author? Yes No						
5. Manuscript Title Partial Resurfacing of the Knee with BioPoly® - Interim Report to 2 Years							
6. Manuscript Ider JBJSOA-D-16-00	ntifying Number (if you kr 011R1	now it)	_				
	I						
Section 2.	The Work Under C	onsideration for Publi	cation				
any aspect of the s statistical analysis, Are there any rel	ubmitted work (including	but not limited to grants, da		nt, commercial, private foundation, etc.) for dy design, manuscript preparation,			
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of compensation clicking the "Add Are there any rel) with entities as descr	ibed in the instructions. Upport relationships that we lest? Yes No	se one line for each enti	al relationships (regardless of amount ity; add as many lines as you need by 36 months prior to publication .			
Name of Entity		Grance	n-Financial Other?	Comments			
Product design/royal	ties						
Section 4.	•	rty Patents & Copyri					
Do you have any	patents, whether plan	ned, pending or issued, bi	oadly relevant to the w	vork? ☐ Yes ✓ No			

Bobic 2



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Bobic 3