

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Kevin

2. Surname (Last Name)
Bree

3. Date
06-October-2014

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Roman Trimba

5. Manuscript Title
Recommendations on Perioperative Management of Anticoagulation

6. Manuscript Identifying Number (if you know it)

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Section 1. Identifying Information

1. Given Name (First Name) John	2. Surname (Last Name) Dundon	3. Date 06-October-2014
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Roman Trimba
5. Manuscript Title Recommendations on Perioperative Management of Anticoagulation		
6. Manuscript Identifying Number (if you know it)		

Section 2. The Work Under Consideration for Publication

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Section 1. Identifying Information

1. Given Name (First Name) Richard	2. Surname (Last Name) Laughlin	3. Date 09-October-2014
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Roman Trimba, M.D.
5. Manuscript Title Recommendations on Perioperative Management of Anticoagulation		
6. Manuscript Identifying Number (if you know it) 		

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If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Smith and Nephew	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consultancy
AO North America	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Payment for lectures including service on speakers bureaus
Taylor & Francis Publishing Company	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Royalties
Grants/grants pending	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	AOFAS
Grants/grants pending	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	OTA
Grants/grants pending	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ohio Third Frontier

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Dr. Laughlin reports grants from Smith and Nephew, personal fees from AO North America, personal fees from Taylor & Francis Publishing Company, grants from Grants/grants pending, grants from Grants/grants pending, grants from Grants/grants pending, outside the submitted work; .

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Section 1. Identifying Information

1. Given Name (First Name)
Roman

2. Surname (Last Name)
Trimba

3. Date
09-October-2014

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

5. Manuscript Title
Recommendations on Perioperative Management of Anticoagulation

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Section 1. Identifying Information

1. Given Name (First Name)
Charles

2. Surname (Last Name)
Woods

3. Date
06-October-2014

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Roman Trimba

5. Manuscript Title
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