

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.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

3. Relevant financial activities outside the submitted work.

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

Relationships not covered above.

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Royalties: Funds are coming in to you or your institution due to your patent

Ricciardi 1



Section 1.	Identifying Information				
1. Given Name (First Name) Benjamin		2. Surname (Last Name) Ricciardi	3. Date 02-March-2015		
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Ernest Sink		
5. Manuscript Title Avoiding Compl	e ications in Periacetabu	lar Osteotomy			
6. Manuscript Identifying Number (if you know it)					
Section 2.	The Work Under C	onsideration for Public	cation		
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 Yes					
6 11 2					
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Section 4.	Intellectual Prope	rty Patents & Copyric	ghts		
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo					

Ricciardi 2



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Section 6. Disclosure Statement			
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.			
Dr. Ricciardi has nothing to disclose.			

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.

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Sink 1



Section 1.	Identifying Inform	ation			
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5. Manuscript Title Avoiding Compl	e ications in Periacetabu	ar Osteotomy			
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Do you have any		ned, pending or issued, broadly relev	rant to the work? Yes V No		

Sink 2



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Swarup 1



Section 1.	dentifying Informa	ation			
1. Given Name (First Name) Ishaan		2. Surname (Last Name) Swarup		3. Date 02-March-2015	
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Ernest Sink		
5. Manuscript Title Avoiding Complications in Periacetabular Osteotomy		ar Osteotomy			
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