

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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3. Relevant financial activities outside the submitted work.

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4. Intellectual Property.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Mmampapatla Thomas

2. Surname (Last Name)

Ramokgopa

3. Date

23-January-2017

4. Are you the corresponding author?

☐ Yes☒ No

Corresponding Author's Name

Dr Dimitri Dimotriou

5. Manuscript Title

HIV and Hip and Knee Arthroplasty - Critical Review of the Current Literature

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Dr. Ramokgopa has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Dick Ronald	2. Surname (Last Name) van der Jagt	3. Date 17-January-2017
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Dr Dimitri Dimitriou
5. Manuscript Title Hiv and Hip and Knee Arthroplasty - Critical Review of the Literature		
6. Manuscript Identifying Number (if you know it) 		

Section 2. The Work Under Consideration for Publication

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

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Dr. van der Jagt has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Dimitrios

2. Surname (Last Name)
Dimitriou

3. Date
10-January-2017

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

5. Manuscript Title
HIV and hip and knee arthroplasty – critical review of the current literature

6. Manuscript Identifying Number (if you know it)

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Dr. Dimitriou has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Jurek Rafal Tomasz

2. Surname (Last Name)

Pietrzak

3. Date

11-January-2017

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name

Dimitrios Dimitriou

5. Manuscript Title

HIV and hip and knee arthroplasty - critical review of the current literature

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Dr. Pietrzak has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Lipalo	2. Surname (Last Name) Mokete	3. Date 18-January-2017
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Dimitrios Dimitriou
5. Manuscript Title HIV and hip and knee arthroplasty - critical review of the current literature		
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