

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Eoghan

2. Surname (Last Name)
Hurley

3. Date
26-May-2017

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Frank Liporace

5. Manuscript Title
Impact of Tranexamic Acid on Blood Management Following Total Hip and Knee Arthroplasty: A Meta-analysis

6. Manuscript Identifying Number (if you know it)

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Dr. Hurley 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)

Arianna

2. Surname (Last Name)

Gianakos

3. Date

26-May-2017

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Frank Liporace

5. Manuscript Title

Impact of Tranexamic Acid on Blood Management Following Total Hip and Knee Arthroplasty: A Meta-analysis

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Dr. Gianakos has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Frank

2. Surname (Last Name)
Liporace

3. Date
26-May-2017

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

5. Manuscript Title
Impact of Tranexamic Acid on Blood Management Following Total Hip and Knee Arthroplasty: A Meta-analysis

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1. Given Name (First Name)
Richard

2. Surname (Last Name)
Yoon

3. Date
26-May-2017

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name
Frank Liporace

5. Manuscript Title
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Sterling

2. Surname (Last Name)
Haring

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26-May-2017

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☐ Yes

☒ No

Corresponding Author's Name
Frank Liporace

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