

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.

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earning royalties or not **Royalties:** Funds are coming in to you or your institution due to your

patent

Bhandari 1



Section 1. Identifying Informa	ation						
Given Name (First Name) Mohit	2. Surname (Last Name) Bhandari		3. Date 06-April-2018				
4. Are you the corresponding author?	Yes ✓ No	Corresponding A					
5. Manuscript Title A Comparison of Treatment Effects for Nonsurgical Therapies and the Minimum Clinically Important Difference in Knee Osteoarthritis: A Systematic Review							
6. Manuscript Identifying Number (if you kno	ow it)						
Section 2. The Work Under Co	nsideration for Pub	lication					
Did you or your institution at any time receiv any aspect of the submitted work (including b							
statistical analysis, etc.)? Are there any relevant conflicts of interest? Yes No							
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 infor	rmation below.						
Name of Entitu	Grant? Personal N	on-Financial Oth	comments				
Name of Entity	Fees?	Support? Other	er• Comments				
Smith & Nephew			Consultancy				
Stryker			Consultancy				
Amgen			Consultancy				
Zimmer			Consultancy				
Moxi med			Consultancy				
Bioventus			Consultancy				
Merck			Consultancy				
Eli Lilly			Consultancy				

Bhandari 2



Name of Entity

ICMJE Form for Disclosure of Potential Conflicts of Interest

			Fees	Support			
Sanofi			✓			Consultancy	
Ferring			✓			Consultancy	
Conmed		Consultancy					
Smith & Nephew							
DePuy							
Eli LIIIy		✓					
Bioventus		✓					
Stryker		✓					
Zimmer		√					
Amgen		√					
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Yes, the following relationships/conditions/circumstances are present (explain below):							
No other relationships/conditions/circumstances that present a potential conflict of interest							
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Personal Non-Financial

Bhandari 3

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 Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Bhandari reports personal fees from Smith & Nephew, personal fees from Stryker, personal fees from Amgen, personal fees from Zimmer, personal fees from Moxi med, personal fees from Bioventus, personal fees from Merck, personal fees from Eli Lilly, personal fees from Sanofi, personal fees from Ferring, personal fees from Conmed, grants from Smith & Nephew, grants from DePuy, grants from Eli Lilly, grants from Bioventus, grants from Stryker, grants from Zimmer, grants from Amgen, outside the submitted work; and Ferring Pharmaceuticals provided funding to Global Research Solutions, Inc., for their medical writing assistance with this work...

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Boyer 1



Section 1.	Identifying Inform	ation					
1. Given Name (First Kevin	Name)	2. Surname (Last Name) Boyer	3. Date 06-April-2018				
4. Are you the corres	sponding author?	Yes ✓ No	Corresponding Author's Name Andrew Concoff				
-	5. Manuscript Title A Comparison of Treatment Effects for Nonsurgical Therapies and the Minimum Clinically Important Difference in Knee Osteoarthritis: A Systematic Review						
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			-				
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Section 3.	Polovant financial:	activities outside the s	ubmitted work				
Place a check in the of compensation) v clicking the "Add +	e appropriate boxes ir with entities as descril	n the table to indicate who bed 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 se present during the 36 months prior to publication.				
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Do you have any pa	atents, whether planr	ned, pending or issued, br	oadly relevant to the work? Yes V No				

Boyer 2



Section 5.	
Section 5.	Relationships not covered above
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✓ Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
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Ferring Pharmac work.	euticals provided funding to Global Research Solutions, Inc., for their medical writing assistance with this
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements rnals may ask authors to disclose further information about reported relationships.
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Concoff 1



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identifying informa					
Given Name (First Name) Andrew	2. Surname (Last Nam Concoff	e)		3. Date 06-April-2018	
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nelevant illiancial a	ctivities outside t	ie subiliitteu	WOIK.		
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If yes, please fill out the appropriate info					
Name of Entity	Grant? Personal Fees?	Non-Financial Support	Other? Co	omments	
erring Pharmaceuticals				norarium recieved for attending visory board meeting	
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo					

Concoff 2



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Do you have any			roadly relevant to the work? Yes No				

Fu 2



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Karlsson 1



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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.

Use this section to report 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.

Definitions.

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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

Rosen 1



Section 1. Identifying Information						
Given Name (First Name) Jeffrey	2. Surname (Last Name) Rosen		3. Date 06-April-2018			
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author Andrew Concoff	or's Name			
5. Manuscript Title A Comparison of Treatment Effects for Osteoarthritis: A Systematic Review	Nonsurgical Therapies and	d the Minimum Clinica	ally Important Difference in Knee			
6. Manuscript Identifying Number (if you k	(now it)					
		_				
Section 2. The Work Under 0	Consideration 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 V No						
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 No	n-Financial Other?	Comments			
Ferring Pharmaceuticals			Honorarium recieved for attending advisory board meeting			
Flexion Therapeutics			Honorarium recieved for attending advisory board meeting			
Novartis			Honorarium			

Rosen 2



Section 4. Intellectual Property Patents & Copyrights
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo
Section 5. Relationships not covered 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/conditions/circumstances are present (explain below):
No other relationships/conditions/circumstances that present a potential conflict of interest
Ferring Pharmaceuticals provided funding to Global Research Solutions, Inc., for their medical writing assistance with this work.
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 Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Rosen reports personal fees from Ferring Pharmaceuticals, personal fees from Flexion Therapeutics, personal fees from Novartis, outside the submitted work; and Ferring Pharmaceuticals provided funding to Global Research Solutions, Inc., for their medical writing assistance with this work.

Evaluation and Feedback

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

Rosen 3



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.

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patent



Section 1. Identifying Information	ation								
1. Given Name (First Name) Emil	2. Surname (Last Name) Schemitsch		3. Date 06-April-2018						
4. Are you the corresponding author?	☐ Yes 🗸		Corresponding Author's Name Andrew Concoff						
5. Manuscript Title A Comparison of Treatment Effects for Nonsurgical Therapies and the Minimum Clinically Important Difference in Knee Osteoarthritis: A Systematic Review									
6. Manuscript Identifying Number (if you kno	ow it)								
Section 2. The Work Under Co									
The Work Under Co	nsideration	for Publication							
Did you or your institution at any time received any aspect of the submitted work (including statistical analysis, etc.)?					c.) for				
Are there any relevant conflicts of interest? Yes V									
Section 3. Relevant financial a	ctivities ou	tside the submit	ted work.						
Place a check in the appropriate boxes ir of compensation) with entities as describ clicking the "Add +" box. You should rep	ed in the inst	ructions. Use one I	ne for each entity	y; add as many lines as you need	d by				
Are there any relevant conflicts of interest? ✓ Yes No									
If yes, please fill out the appropriate info	rmation belov	<i>.</i> .							
) Per	sonal Non-Finar	cial 2						
Name of Entity	Grant•	es? Support	J Other• C	omments					
Stryker		✓		norarium					
Smith & Nephew		√	Ho	norarium					
TS		✓	Но	norarium					
Amgen		✓	Ho	norarium					
Sanofi		✓	Ho	norarium					
Pendopharm		✓	Ho	norarium					
Stryker	✓		inst	titutional support					
Depuy	✓		inst	titutional support					



Name of Entity	Grant? Personal	Non-Financial O	ther? Comments			
· · · · · · · · · · · · · · · · · · ·	Fees?	Support?				
Smith & Nephew	✓		institutional support			
Zimmer	✓		institutional support			
Section 4. Intellectual Propert	y Patents & Copy	yrights				
Do you have any patents, whether plann	ed, pending or issued	, broadly relevant	to the work? Yes	No		
Section 5. Relationships not c	overed above					
Are there other relationships or activities potentially influencing, what you wrote i	n the submitted work	?		earance of		
No other relationships/conditions/circumstances that present a potential conflict of interest						
Ferring Pharmaceuticals provided fundir work.	ng to Global Research	Solutions, Inc., for	their medical writing assistar	nce with this		
At the time of manuscript acceptance, jo On occasion, journals may ask authors to				losure statements.		
Section 6. Disclosure Stateme	nt					
Based on the above disclosures, this form below.	n will automatically ge	enerate a disclosur	e statement, which will appe	ar in the box		
Dr. Schemitsch reports personal fees from from Amgen, personal fees from Sanofi, from Smith & Nephew, grants from Zimr Global Research Solutions, Inc., for their	personal fees from Pe mer, outside the subn	ndopharm, grants nitted work; and F	s from Stryker, grants from De erring Pharmaceuticals provi	epuy, grants		



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Einhorn 1



Section 1. Identifying Inform	nation						
1. Given Name (First Name) Thomas	2. Surname (Last Name) Einhorn	3. Date 06-April-2018					
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Andrew Concoff					
5. Manuscript Title A Comparison of Treatment Effects for Nonsurgical Therapies and the Minimum Clinically Important Difference in Knee Osteoarthritis: A Systematic Review							
6. Manuscript Identifying Number (if you kr	now it)	_					
Section 2. The Work Under C	onsideration for Public	cation					
Did you or your institution at any time rece any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, da		ent, commercial, private foundation, etc.) for udy design, manuscript preparation,				
Section 3. Relevant financial	activities outside the s	submitted work.					
Place a check in the appropriate boxes of compensation) with entities as descr clicking the "Add +" box. You should re Are there any relevant conflicts of interesting the second conflicts of the sec	ibed in the instructions. Us port relationships that wer	se one line for each e	ntity; add as many lines as you need by				
If yes, please fill out the appropriate info							
Name of Entity	Grant? Personal Nor Fees? S	n-Financial other?	Comments				
MyArthritisRx			Co-founder and Chief Scientific Officer of MyArthritisRx				
BJS Reviews		$\overline{}$	Journal Editor				
Section 4. Intellectual Branch							
Intellectual Prope	rty Patents & Copyric	ghts					
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the	work? Yes Vo				

Einhorn 2



Section 5. Polotionships not sourced about					
Relationships not covered above					
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At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statement On occasion, journals may ask authors to disclose further information about reported relationships. Section 6. Disclosure Statement					
Disclosure Statement					
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.					
Dr. Einhorn reports personal fees from MyArthritisRx, other from JBJS Reviews, outside the submitted work; and Ferring Pharmaceuticals provided funding to Global Research Solutions, Inc., for their medical writing assistance with this work.					

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Einhorn 3