

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.

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

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Brustowicz 1



Section 1.	Identifying Inform	nation			
1. Given Name (Fi Robert	rst Name)	2. Surname (Last Name) Brustowicz	3. Date 02-December-2019		
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Rachel L. DiFazio		
Hip Disease	ve Management of Rec		or the Non-Ambulant Child with Cerebral Palsy and Spastic		
6. Manuscript Ider	ntifying Number (if you kr	now it)	_		
Section 2.	The Work Under Co	onsideration for Public	ation		
any aspect of the s statistical analysis,	ubmitted work (including	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,		
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Section 3.	Relevant financial	activities outside the s	ubmitted work.		
of compensation clicking the "Add) with entities as descri	ibed 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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Section 4.	Intellectual Proper	rty Patents & Copyri <u>c</u>	hts		
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? ☐ Yes ✓ No		

Brustowicz 2



Section 5. Polationships not severed above
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Dr. Brustowicz has nothing to disclose.

Evaluation and Feedback

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Brustowicz 3



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Friel 1



Section 1. Identifying Inform	ation		
1. Given Name (First Name) Kristen	2. Surname (Last Name) Friel		3. Date 02-December-2019
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Nan Rachel DiFazio	ne
5. Manuscript TitleTeam Approach: The peri-operative manalist palsy and spastic hip6. Manuscript Identifying Number (if you known)		re hip surgery for the non-a	mbulant child with cerebral
Reviews-D-19-00185		-	
Section 2. The Work Under Co	onsideration for Public	ation	
Did you or your institution at any time recei any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	ive payment or services from but not limited to grants, dat	a third party (government, con	
Section 3. Relevant financial	activities outside the s	ubmitted work.	
Place a check in the appropriate boxes i of compensation) with entities as descri clicking the "Add +" box. You should rep Are there any relevant conflicts of interes	bed in the instructions. Us port relationships that were	e one line for each entity; a	dd as many lines as you need by
Section 4. Intellectual Proper			
Intellectual Proper	ty Patents & Copyrig	hts	
Do you have any patents, whether plant	ned, pending or issued, bro	oadly relevant to the work?	☐ Yes ✓ No

Friel 2



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Kristen Friel has nothing to disclose

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Glader 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fii Laurie	rst Name)	2. Surname (Last Name) Glader	3. Date 13-December-2019
4. Are you the cor	responding author?	☐ Yes ✓ No	Corresponding Author's Name Rachel Difazio
disease			the non-ambulant child with cerebral palsy and spastic hip
Section 2.	The Work Under Co	onsideration for Public	cation
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Do you have any	patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No

Glader 2



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DiFazio 1



Section 1.	Identifying Inform	ation					
1. Given Name (Fii Rachel	ven Name (First Name) nel		2. Surname (Last Name) DiFazio		3. Date 29-Novem	ber-2019	
4. Are you the cor	responding author?	✓ Yes	No				
Team Approach: palsy and spastic 6. Manuscript Ider	 5. Manuscript Title Team Approach: The peri-operative management of reconstructive hip surgery for the non-ambulant child with cerebral palsy and spastic hip 6. Manuscript Identifying Number (if you know it) Reviews - D-19-00185 						
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Section 3.	Relevant financial	activities	outside the submitted worl	·k.			
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Section 4.	Intellectual Proper	ty Pate	nts & Copyrights				
Do you have any	patents, whether plan	ned, pendi	ng or issued, broadly relevant to	the work?	Yes	✓ No	

DiFazio 2



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Lawler 1



Section 1. Identifying Inform	nation	
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4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Rachel DiFazio
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Do you have any patents, whether plan		

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Shore 1



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1. Given Name (Fii Benjamin	rst Name)	2. Surname (Last Name) Shore		3. Date 30-November-2019
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Nar Rachel DiFazio	me
palsy and spastic	The peri-operative ma		ve hip surgery for the non-a	mbulant child with cerebral
Reviews-D-19-00		iow it)	-	
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any aspect of the s statistical analysis,	stitution at any time recei ubmitted work (including	ive payment or services from but not limited to grants, da		mmercial, private foundation, etc.) for sign, manuscript preparation,
Section 3.	Relevant financial	activities outside the s	ubmitted work.	
of compensation clicking the "Add	ı) with entities as descri	bed in the instructions. Us port relationships that wer	e one line for each entity; a	ationships (regardless of amount dd as many lines as you need by conths prior to publication.
Section 4.	Intellectual Proper	ty Patents & Copyrig	ıhts	
Do you have any			oadly relevant to the work?	☐ Yes 🗸 No

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Section 5. Relationships not covered above
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
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
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. Shore 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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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.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

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.

Entity: government agency, foundation, commercial sponsor, academic institution, etc.

Grant: A grant from an entity, generally [but not always] paid to your organization

Personal Fees: Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

Non-Financial Support: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

Other: Anything not covered under the previous three boxes

Pending: The patent has been filed but not issued

Issued: The patent has been issued by the agency

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

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Section 1.	Identifying Inform	nation		
1. Given Name (First Name) Rachel		2. Surname (Last Name) Tombeno	3. Date 16-December-2019	
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Rachel DiFazio	
5. Manuscript Title Team Approach: The peri-operative management of reconstructive hip surgery for the non-ambulant child with cerebral palsy and spastic hip 6. Manuscript Identifying Number (if you know it) Reviews-D-19-00185				
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 Vo				
Section 3.	Relevant financial	activities outside the s	ubmitted 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? Yes Vo				
Section 4.	Intellectual Proper	ty Patents & Copyrig	hts	
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo				

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Section 5.	Deletionaline not consulate on		
	Relationships not covered above		
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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.			
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