

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) Soon-Sun	2. Surname (Last Name) Kwon	3. Date 24-January-2014
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Moon Seok Park
5. Manuscript Title An introduction to the linear mixed model for orthopaedic research		
6. Manuscript Identifying Number (if you know it) 		

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Dr. Kwon 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)

Moon Seok

2. Surname (Last Name)

Park

3. Date

24-January-2014

4. Are you the corresponding author?

☒ Yes

☐ No

5. Manuscript Title

An introduction to the linear mixed model for orthopaedic research

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Dr. Park has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Seung Yeol

2. Surname (Last Name)
Lee

3. Date
24-January-2014

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name
Moon Seok Park

5. Manuscript Title
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1. Given Name (First Name) Kyoung Min	2. Surname (Last Name) Lee	3. Date 24-January-2014
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