ICMJE INTERNATIONAL COMMITTEE of MEDICAL JOURNAL EDITORS

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name): BOOPALAN
2. Surname (Last Name): RAMASAMY
3. Date: 12-October-2020

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

Corresponding Author's Name: KAUSHIK BHOWMICK

5. Manuscript Title: The use of angled blade plate for 31A3 Intertrochanteric fractures

6. Manuscript Identifying Number (if you know it): JBJS-D-19-01265R2

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Dr. RAMASAMY has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name): KAUSHIK
2. Surname (Last Name): BHOWMICK
3. Date: 12-October-2020

4. Are you the corresponding author? [✓] Yes [ ] No

5. Manuscript Title: The use of angled blade plate for 31A3 Intertrochanteric fractures

6. Manuscript Identifying Number (if you know it): JBJS-D-19-01265R2

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Dr. BHOWMICK has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name): REKA
2. Surname (Last Name): KARUPPUSAMI
3. Date: 12-October-2020

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

Corresponding Author's Name: KAUSHIK BHOWMICK

5. Manuscript Title: The use of angled blade plate for 31A3 Intertrochanteric fractures

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1. Given Name (First Name): THILAK
2. Surname (Last Name): JEPEGNANAM
3. Date: 12-October-2020

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

Corresponding Author's Name: KAUSHIK BHOWMICK

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1. Given Name (First Name): VIJU
2. Surname (Last Name): VARGHESE
3. Date: 12-October-2020

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

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