ICMJE DISCLOSURE FORM

Date: MAY. 17th, 2022 Your Name: Songtao Jin Manuscript Title:<u>Comparative study of the modified transtibial technique and the transportal technique in anterior</u> <u>cruciate ligament reconstruction</u> Manuscript number (if known): APM-21-2460

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

		Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution) planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	XNone	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	X_None	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
6	educational events	X None	
0	5 Payment for expert testimony	XNone	
	testimony		
7	Support for attending	X None	
	meetings and/or travel		
8	Patents planned, issued or	X None	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	X None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non-	X None	
	financial interests		

Please summarize the above conflict of interest in the following box:

None.

Please place an "X" next to the following statement to indicate your agreement:

__X_ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

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Date: MAY. 17th, 2022 Your Name: Lei Wang Manuscript Title: <u>Comparative study of the modified transtibial technique and the transportal technique in anterior</u> <u>cruciate ligament reconstruction</u> Manuscript number (if known): <u>APM-21-2460</u>

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4	Consulting fees	XNone	

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	speakers bureaus,		
	manuscript writing or		
6	educational events	X None	
0	5 Payment for expert testimony	XNone	
	testimony		
7	Support for attending	X None	
	meetings and/or travel		
8	Patents planned, issued or	X None	
	pending		
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	Advisory Board		
10	Leadership or fiduciary role	XNone	
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Date: MAY. 17th, 2022 Your Name: Shiwei Zhou Manuscript Title: <u>Comparative study of the modified transtibial technique and the transportal technique in anterior</u> <u>cruciate ligament reconstruction</u> Manuscript number (if known):APM-21-2460

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		Time frame: past	36 months
2	Grants or contracts from	XNone	
	any entity (if not indicated		
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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

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0	5 Payment for expert testimony	XNone	
	testimony		
7	Support for attending	X None	
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