

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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#### 1. Identifying information.

#### 2. The work under consideration for publication.

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#### 4. Intellectual Property.

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

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Michael	2. Surname (Last Name) Laidlaw	3. Date 08-June-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Mark D. Miller
5. Manuscript Title Management of bone deficiency in revision anterior cruciate ligament reconstruction		
6. Manuscript Identifying Number (if you know it) AOJ-17-2		

### 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  No

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Dr. Laidlaw has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Kadir	2. Surname (Last Name) Buyukdogan	3. Date 08-June-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Mark D. Miller
5. Manuscript Title Management of bone deficiency in revision anterior cruciate ligament reconstruction		
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Dr. Buyukdogan has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name)  
Brian

2. Surname (Last Name)  
Werner

3. Date  
08-June-2017

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Mark D. Miller

5. Manuscript Title  
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1. Given Name (First Name)  
Mark

2. Surname (Last Name)  
Miller

3. Date  
08-June-2017

4. Are you the corresponding author?  Yes  No

5. Manuscript Title  
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