

## 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)

Justin

2. Surname (Last Name)

Arner

3. Date

17-November-2017

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Craig S. Mauro

5. Manuscript Title

Management of bone deficiency in revision anterior cruciate ligament reconstruction

6. Manuscript Identifying Number (if you know it)

AOJ-17-159

### Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?  Yes  No

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Are there any relevant conflicts of interest?  Yes  No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

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Dr. Arner 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) Ashley	2. Surname (Last Name) Disantis	3. Date 17-November-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Craig S. Mauro
5. Manuscript Title Management of bone deficiency in revision anterior cruciate ligament reconstruction		
6. Manuscript Identifying Number (if you know it) AOJ-17-159		

### 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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Are there any relevant conflicts of interest?  Yes  No

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

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Dr. Disantis 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)  
James

2. Surname (Last Name)  
Bradley

3. Date  
17-November-2017

4. Are you the corresponding author?  Yes  No  
Corresponding Author's Name  
Craig S. Mauro

5. Manuscript Title  
Management of bone deficiency in revision anterior cruciate ligament reconstruction

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AOJ-17-159

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Are there any relevant conflicts of interest?  Yes  No

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Are there any relevant conflicts of interest?  Yes  No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Arthrex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Receives Royalties

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No



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Dr. Bradley receives royalties from Arthrex..

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Brian	2. Surname (Last Name) Zuckerbraun	3. Date 17-November-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Craig S. Mauro
5. Manuscript Title Management of bone deficiency in revision anterior cruciate ligament reconstruction		
6. Manuscript Identifying Number (if you know it) AOJ-17-159		

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Are there any relevant conflicts of interest?  Yes  No

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Dr. Zuckerbraun has nothing to disclose.

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Craig

2. Surname (Last Name)  
Mauro

3. Date  
17-November-2017

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Are there any relevant conflicts of interest?  Yes  No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Arthrex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consultant

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Dr. Mauro is a consultant for Arthrex.

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