

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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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)  
James

2. Surname (Last Name)  
Selfe

3. Date  
15-March-2018

4. Are you the corresponding author?  Yes  No

5. Manuscript Title  
Anterior knee pain subgroups: the first step towards a personalized treatment

6. Manuscript Identifying Number (if you know it)  
AOJ-2018-PJ-02

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

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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. Selfe 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) Jessie	2. Surname (Last Name) Janssen	3. Date 15-March-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name James Selfe
5. Manuscript Title Anterior knee pain subgroups: the first step towards a personalized treatment		
6. Manuscript Identifying Number (if you know it) AOJ-2018-PJ-02		

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

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Dr. Janssen has nothing to disclose.

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1. Given Name (First Name) Benjamin	2. Surname (Last Name) Drew	3. Date 15-March-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name James Selfe
5. Manuscript Title Anterior knee pain subgroups: the first step towards a personalized treatment		
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1. Given Name (First Name) Paola	2. Surname (Last Name) Dey	3. Date 15-March-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name James Selfe
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