

#### **Instructions**

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

## Identifying information.

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## **Intellectual Property.**

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

## Relationships not covered above.

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Other: Anything not covered under the previous three boxes

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Licensed: The patent has been licensed to an entity, whether

earning royalties or not

Royalties: Funds are coming in to you or your institution due to your

patent

Vanderbrook 1



Section 1. Identifying	Information		
1. Given Name (First Name) Doug	2. Surname (Last Name) Vanderbrook	3. Date 30-August-2019	
4. Are you the corresponding author	or? Yes ✓ No	Corresponding Author's Name Casey M. O'Connor	
5. Manuscript Title The Impact of Total Knee Arthro	plasty on Golfing Activity		
6. Manuscript Identifying Number (	if you know it)		
Section 2. The Work Ur	nder Consideration for Public	cation	
Did you or your institution <b>at any time</b> 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  Volume  Yes			
Section 3. Relevant fina	ancial activities outside the s	submitted work.	
of compensation) with entities a	s described in the instructions. Us ould report relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re <b>present during the 36 months prior to publication</b> .	
Section 4. Intellectual I	Property Patents & Copyri	ghts	
Do you have any patents, wheth	er planned, pending or issued, br	roadly relevant to the work? Yes V No	

Vanderbrook 2



Section 5. Polationships not solvered phase
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Section 6. Disclosure Statement
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Dr. Vanderbrook has nothing to disclose.

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Vanderbrook 3



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Anoushiravani 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Afshin	2. Surname (Last Name) Anoushiravani	3. Date 30-August-2019
4. Are you the corresponding author?	Yes 🗸 No	Corresponding Author's Name Casey M. O'Connor
5. Manuscript Title The Impact of Total Knee Arthroplasty	on Golfing Activity	
6. Manuscript Identifying Number (if you k	now it)	
		_
Section 2. The Work Under C	onsideration for Publi	cation
	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Section 3. Relevant financial	activities outside the	submitted work.
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Section 4. Intellectual Prope	rty Patents & Copyri	ghts
Do you have any patents, whether plan	nned, pending or issued, bi	roadly relevant to the work? Yes V No

Anoushiravani 2



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Dr. Anoushiravani has nothing to disclose.

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O'Connor 1



Section 1. Identifying Inform	nation			
Given Name (First Name) Casey	2. Surname (Last Name) O'Connor 3. Date 30-August-2019			
4. Are you the corresponding author?	e you the corresponding author?			
5. Manuscript Title The Impact of Total Knee Arthroplasty o	on Golfing Activity			
6. Manuscript Identifying Number (if you kr	now it)			
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Section 3. Relevant financial	activities outside the submitted work.			
of compensation) with entities as descr	in the table to indicate whether you have financial re ibed in the instructions. Use one line for each entity; port relationships that were <b>present during the 36 r</b> est?	add as many lines as you need by		
Section 4. Intellectual Proper	rty Patents & Copyrights			
Do you have any patents, whether plan	ned, pending or issued, broadly relevant to the work	? ☐ Yes ✓ No		

O'Connor 2



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patent

Adams 1



Section 1. Identifying	J Information		
1. Given Name (First Name) Curtis	2. Surname (Last Name) Adams	3. Date 30-August-2019	
4. Are you the corresponding aut	nor? Yes ✓ No	Corresponding Author's Name Casey M. O'Connor	
5. Manuscript Title The Impact of Total Knee Arthi	oplasty on Golfing Activity		
6. Manuscript Identifying Numbe	r (if you know it)		
		_	
Section 2. The Work l	Inder Consideration for Publi	cation	
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Section 3. Relevant fi	nancial activities outside the	submitted work.	
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Do you have any patents, when	her planned, pending or issued, b	roadly relevant to the work? Yes V No	

Adams 2



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n-Financial Support: Examples include drugs/equipment

Whitney 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fir	rst Name)	2. Surname (Last Name) Whitney	3. Date 30-August-2019
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name  Casey M. O'Connor
5. Manuscript Title The Impact of To	e otal Knee Arthroplasty o	on Golfing Activity	
6. Manuscript Ider	ntifying Number (if you kr	now it)	
			_
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Do you have any	patents, whether plan	ned, pending or issued, b	roadly relevant to the work? Yes V No

Whitney 2



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Whitney 3



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**Licensed:** The patent has been licensed to an entity, whether earning royalties or not

**Royalties:** Funds are coming in to you or your institution due to your patent

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Section 1. Ider	ntifying Information		
Given Name (First Nam Jason	ne) 2. Surna Tartagli	me (Last Name) one	3. Date 30-August-2019
4. Are you the correspond	ding author? Yes	<b>✓</b> No	Corresponding Author's Name Casey M. O'Connor
5. Manuscript Title The Impact of Total Kno			
6. Manuscript Identifying	Number (if you know it)		
			-
Section 2. The	Work Under Considera	tion for Public	ation
Did you or your institution <b>at any time</b> 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  Volume  Yes			
Section 3. Rele	vant financial activitie	s outside the s	ubmitted work.
of compensation) with	entities as described in the x. You should report relati	e instructions. Us	ether you have financial relationships (regardless of amount e one line for each entity; add as many lines as you need by e <b>present during the 36 months prior to publication</b> .
Section 4. Intel	lectual Property Pat	ents & Copyrig	hts
Do you have any paten	ts, whether planned, pend	ling or issued, br	oadly relevant to the work? ☐ Yes ✓ No

Tartaglione 2



Section 5. Polistianshing not savered above
Relationships not covered above
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?
Yes, the following relationships/conditions/circumstances are present (explain below):
✓ No other relationships/conditions/circumstances that present a potential conflict of interest
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Section 6. Disclosure Statement
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Dr. Tartaglione has nothing to disclose.

## **Evaluation and Feedback**

Please visit <a href="http://www.icmje.org/cgi-bin/feedback">http://www.icmje.org/cgi-bin/feedback</a> to provide feedback on your experience with completing this form.

Tartaglione 3



#### **Instructions**

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

## Identifying information.

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

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes"

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This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

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#### Definitions.

**Entity:** government agency, foundation, commercial sponsor, academic institution, etc.

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**Non-Financial Support:** Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

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Section 1. Identifying Inform	mation	
Given Name (First Name)  Jared	2. Surname (Last Name) Roberts	3. Date 30-August-2019
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Casey M. O'Connor
5. Manuscript Title The Impact of Total Knee Arthroplasty	on Golfing Activity	
6. Manuscript Identifying Number (if you know it)		
		_
Section 2. The Work Under Consideration for Publication		
Did you or your institution <b>at any time</b> 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  You		
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Section 4. Intellectual Prope	erty Patents & Copyri	ghts
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Dr. Roberts has nothing to disclose.

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Roberts 3