

ICMJE DISCLOSURE FORM

Date: 1/8/23 (1st August 2023)

Your Name: Erden Ali

Manuscript Title: Treatment of Femoral Bone Loss in Revision Total Hip Arthroplasty, A Clinical Practice Review_

Manuscript number (if known): AOJ-23-31(AOJ-2022-RTHA-05)

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 current manuscript only.

The author's relationships/activities/interests should be defined broadly. 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) | Specifications/Comments (e.g., if payments were made to you or to your institution) |
|---|--|--|---|
| Time frame: Since the initial 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. | ___ None | |
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| Time frame: past 36 months | | | |
| 2 | Grants or contracts from any entity (if not indicated in item #1 above). | ___ None | |
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| 3 | Royalties or licenses | ___ None | |
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| 4 | Consulting fees | ___ None | |
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| 5 | | ___ None | |

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

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

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

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

ICMJE DISCLOSURE FORM

Date: 3 November 2023

Your Name: Lisa Howard

Manuscript Title: Treatment of Femoral Bone Loss in Revision Total Hip Arthroplasty

Manuscript number (if known): AOJ-23-31(AOJ-2022-RTHA-05)

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.

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| Time frame: past 36 months | | | |
| 2 | Grants or contracts from any entity (if not indicated in item #1 above). | __x__ None | |
| | | | |
| 3 | Royalties or licenses | __x__ None | |
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| 4 | Consulting fees | __x__ None | |
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| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events | <input checked="" type="checkbox"/> None | |
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| 8 | Patents planned, issued or pending | <input checked="" type="checkbox"/> None | |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board | <input checked="" type="checkbox"/> None | |
| 10 | Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid | Canadian Arthroplasty Society | |
| 11 | Stock or stock options | <input checked="" type="checkbox"/> None | |
| 12 | Receipt of equipment, materials, drugs, medical writing, gifts or other services | <input checked="" type="checkbox"/> None | |
| 13 | Other financial or non-financial interests | Depuy Synthes, Stryker, Smith & Nephew, Zimmer-Biomet | Institutional/division fellowship and research support. |

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

Dr. Lisa Howard reports receiving Institutional/division fellowship and research support from Depuy Synthes, Stryker, Zimmer-Biomet, and Smith & Nephew, and serves as the committee/board member of Canadian Arthroplasty Society.

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.

ICMJE DISCLOSURE FORM

Date: 20 October 2023

Your Name: Michael E Neufeld

Manuscript Title: Treatment of Femoral Bone Loss in Revision Total Hip Arthroplasty

Manuscript number (if known): AOJ-23-31(AOJ-2022-RTHA-05)

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.

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| Time frame: past 36 months | | | |
| 2 | Grants or contracts from any entity (if not indicated in item #1 above). | __x__ None | |
| | | | |
| 3 | Royalties or licenses | __x__ None | |
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| 4 | Consulting fees | __x__ None | |
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| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events | <input checked="" type="checkbox"/> None | |
| 6 | Payment for expert testimony | <input checked="" type="checkbox"/> None | |
| 7 | Support for attending meetings and/or travel | <input checked="" type="checkbox"/> None | |
| 8 | Patents planned, issued or pending | <input checked="" type="checkbox"/> None | |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board | <input checked="" type="checkbox"/> None | |
| 10 | Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid | Canadian Arthroplasty Society | |
| 11 | Stock or stock options | <input checked="" type="checkbox"/> None | |
| 12 | Receipt of equipment, materials, drugs, medical writing, gifts or other services | <input checked="" type="checkbox"/> None | |
| 13 | Other financial or non-financial interests | Depuy Synthes, Stryker, Smith & Nephew, Zimmer-Biomet | Institutional/division fellowship and research support. |

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

Dr. Michael E Neufeld reports receiving Institutional/division fellowship and research support from Depuy Synthes, Stryker, Zimmer-Biomet, and Smith & Nephew, and serves as the committee/board member of Canadian Arthroplasty Society.

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.

ICMJE DISCLOSURE FORM

Date: 20 October 2023

Your Name: Bassam A. Masri

Manuscript Title: Treatment of Femoral Bone Loss in Revision Total Hip Arthroplasty

Manuscript number (if known): AOJ-23-31(AOJ-2022-RTHA-05)

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.

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| Time frame: past 36 months | | | |
| 2 | Grants or contracts from any entity (if not indicated in item #1 above). | __x__ None | |
| | | | |
| 3 | Royalties or licenses | __x__ None | |
| | | | |
| 4 | Consulting fees | __Stryker | |
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|----|--|---|---|
| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events | <input type="checkbox"/> AO foundation | |
| 6 | Payment for expert testimony | Various law firms | |
| 7 | Support for attending meetings and/or travel | <input checked="" type="checkbox"/> None | |
| 8 | Patents planned, issued or pending | <input checked="" type="checkbox"/> None | |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board | <input checked="" type="checkbox"/> None | |
| 10 | Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid | Deputy Editor, JBJS | |
| 11 | Stock or stock options | <input checked="" type="checkbox"/> None | |
| 12 | Receipt of equipment, materials, drugs, medical writing, gifts or other services | <input checked="" type="checkbox"/> None | |
| 13 | Other financial or non-financial interests | Depuy Synthes, Stryker, Smith & Nephew, Zimmer-Biomet | Institutional/division fellowship and research support. |

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

Dr. Bassam Masri reports receiving consulting fees from Stryker, receiving payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events from AO foundation, receiving payment for expert testimony from various law firms and receiving institutional/division fellowship and research support from Depuy Synthes, Stryker, Zimmer-Biomet, and Smith & Nephew. He also serves as the Deputy Editor of JBJS.

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.