INDIVIDUAL CONFLICT OF INTEREST STATEMENT

American Association of Hip and Knee Surgeons

(Adopted from the American Academy of Orthopaedic Surgeons disclosure statement)

The following form <u>must be filled out completely and submitted by each author (example, 6 authors, 6 forms).</u> All items require a response. If there is no relevant disclosure for a given item, enter "*None*."

Is The American Joint Replacement Registry Able to Correctly Classify Revision Total Knee Arthroplasty Procedural Diagnoses?

Manuscript Title

- 1. Royalties from a company or supplier (The following conflicts were disclosed) None
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- 3A. Paid employee for a company or supplier (The following conflicts were disclosed) None
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- 4. Stock or stock options in a company or supplier (The following conflicts were disclosed) None
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Each author must sign AND print or type his/her name, date and submit a separate form

In addition, one BLINDED Conflict of Interest form (no author names used) should be submitted per manuscript with all author disclosures.

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Nov 11, 2022

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