

ICMJE Form for Disclosure of Potential Conflicts of Interest

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.

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4. Intellectual Property.

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

5. Relationships not covered above.

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



ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Benjamin	2. Surname (Last Name) Ahn	3. Date 4-22-2024
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Matthew Quinn
5. Manuscript Title NFL Quarterbacks with Ulnar Collateral Ligament Injuries Have High Return to Play Rates, but Older Players Have Inferior Post-Injury Performance		
6. Manuscript Identifying Number (if you know it)		

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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

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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. Ahn has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) J. Alex	2. Surname (Last Name) Albright	3. Date 4-22-2024
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Matthew Quinn
5. Manuscript Title NFL Quarterbacks with Ulnar Collateral Ligament Injuries Have High Return to Play Rates, but Older Players Have Inferior Post-Injury Performance		
6. Manuscript Identifying Number (if you know it)		

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1. Given Name (First Name) Rory	2. Surname (Last Name) Byrne	3. Date 4-22-2024
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Matthew Quinn
5. Manuscript Title NFL Quarterbacks with Ulnar Collateral Ligament Injuries Have High Return to Play Rates, but Older Players Have Inferior Post-Injury Performance		
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Are there any relevant conflicts of interest? Yes No

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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. Byrne has nothing to disclose.

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1. Given Name (First Name) Steven	2. Surname (Last Name) DeFroda	3. Date 4-22-2024
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Matthew Quinn
5. Manuscript Title NFL Quarterbacks with Ulnar Collateral Ligament Injuries Have High Return to Play Rates, but Older Players Have Inferior Post-Injury Performance		
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1. Given Name (First Name)

Matthew

2. Surname (Last Name)

Quinn

3. Date

4-22-2024

4. Are you the corresponding author?

Yes No

5. Manuscript Title

NFL Quarterbacks with Ulnar Collateral Ligament Injuries Have High Return to Play Rates, but Older Players Have Inferior Post-Injury Performance

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest? Yes No

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Section 4. Intellectual Property -- Patents & Copyrights

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2. The work under consideration for publication.

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

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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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5. Manuscript Title NFL Quarterbacks with Ulnar Collateral Ligament Injuries Have High Return to Play Rates, but Older Players Have Inferior Post-Injury Performance		
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