

# CONFLICT OF INTEREST STATEMENT

## Arthroplasty Today

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

The following form must be filled out completely and submitted by each author (example, 6 authors, 6 forms). If no discloser is required, please write/type "none" at the end of each sentence.

- Manuscript Title *Comparing contemporary revision burden among hip and knee replacement registries*
1. Royalties from a company or supplier (The following conflicts were disclosed) *NONE*
  2. Speakers bureau/paid presentations for a company or supplier (The following conflicts were disclosed) *NONE*
  - 3A. Paid employee for a company or supplier (The following conflicts were disclosed) *NONE*
  - 3B. Paid consultant for a company or supplier (The following conflicts were disclosed) *NONE*
  - 3C. Unpaid consultants for a company or supplier (The following conflicts were disclosed) *NONE*
  4. Stock or stock options in a company or supplier (The following conflicts were disclosed) *NONE*
  5. Research support from a company or supplier as a Principal Investigator (The following conflicts were disclosed) *NONE*
  6. Other financial or material support from a company or supplier (The following conflicts were disclosed) *NONE*
  7. Royalties, financial or material support from publishers (The following conflicts were disclosed) *NONE*
  8. Medical/Orthopaedic publications editorial/governing board (The following conflicts were disclosed) *NONE*
  9. Board member/committee appointments for a society (The following conflicts were disclosed)

*CHAIR, AGING & PUBLIC HEALTH SECTION, AMERICAN PUBLIC HEALTH ASSOCIATION*

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.

*CARYN D. ETIKIN* *Caryn D. Etkin* *4/4/10*  
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