

# CONFLICT OF INTEREST STATEMENT

## *The Journal of Arthroplasty*


(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.**

### Pediatric Total Knee Arthroplasty

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Manuscript Title

1. Royalties from a company or supplier (The following conflicts were disclosed)  

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) None

### **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.

Robert T. Trousdale, M.D.

Author Name (Print or Type)



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1.14.16

Date