## CONFLICT OF INTEREST STATEMENT

## Arthroplasty Today

(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>. <u>If no discloser is required, please write/type "none" at the end of each sentence.</u>

Treatment of Intra-articular hip malignancy with extra-articular resection, preservation of the acetabular columns and total hip arthroplasty: A case report.

Manuscript Title					
1.	Royalties from a company or supplier (The following conflicts were disclosed)  Microport				
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)  Zimmer Biomet  Microport Orthopaedics, Inc				
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) Zimmer, Inc.				
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) Wolters Kluwer Health				
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	n (no autho	r names us	sed) should be submit	ted per manuscript with al
author disclosures.		$O_0$	<i>j</i>		

Author Name (Print or Type)

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