## 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."

Manuscript Title Surgical Selection Criteria Compliance is Associated with a Lower Risk of Periprosthetic Joint Infection in Total Hip Arthroplasty Royalties from a company or supplier (The following conflicts were disclosed) 1. Speakers bureau/paid presentations for a company or supplier (The following conflicts were disclosed) 2. MIENU Paid employee for a company or supplier (The following conflicts were disclosed) 3A. Paid consultant for a company or supplier (The following conflicts were disclosed) 3B. Neme Unpaid consultants for a company or supplier (The following conflicts were disclosed) 3C. MANCE Stock or stock options in a company or supplier (The following conflicts were disclosed) 4. None Research support from a company or supplier as a Principal Investigator (The following conflicts were disclosed) 5. XITTL Other financial or material support from a company or supplier (The following conflicts were disclosed) 6. None 7. Royalties, financial or material support from publishers (The following conflicts were disclosed) None Medical/Orthopaedic publications editorial/governing board (The following conflicts were disclosed) 8. Board member/committee appointments for a society (The following conflicts were disclosed) 9. Each author must sign AND print or type his/her name, date and submit a separate form

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Stephen L. Kates, MD

Author Signature

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

04/25/19 Date