INDIVIDUAL CONFLICT OF INTEREST STATEMENT

American Association of Hip and Knee Surgeons (Adopted from the American Academy of Orthopaedic Surgeons disclosure statement)

Per	onal Protective Equipment: Current Best Practices for Orthopaedic Teams
Man	script Title Personal Priedle Eaupment, Current Ost Pedico for Orthously Surger
1.	Royalties from a company or supplier (The following conflicts were disclosed)
	None
2.	いしへそ Speakers bureau/paid presentations for a company or supplier (The following conflicts were disclosed)
2.	
	Nore
3A.	Paid employee for a company or supplier (The following conflicts were disclosed)
	Val
3B.	Paid consultant for a company or supplier (The following conflicts were disclosed)
	Norl
3C.	Unpaid consultants for a company or supplier (The following conflicts were disclosed)
	Noo
4.	Stock or stock options in a company or supplier (The following conflicts were disclosed)
	Nee
5.	الاصح Research support from a company or supplier as a Principal Investigator (The following conflicts were disclosed)
C	$N_{\mathcal{H}}$ Other financial or material support from a company or supplier (The following conflicts were disclosed)
6.	
	Nor
7.	Royalties, financial or material support from publishers (The following conflicts were disclosed)
	Nov
8.	Medical/Orthopaedic publications editorial/governing board (The following conflicts were disclosed)
	Nere
9.	Board member/committee appointments for a society (The following conflicts were disclosed) AAHVS - EBM committee member
Ea	h author must sign AND print or type his/her name, date and submit a separate form
In	iddition, one BLINDED Conflict of Interest form (no author names used) should be submitted per manuscript with all
a	hor disclosures.

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