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 must be filled out completely and submitted by each author (example, 6 authors, 6 forms).

Manuscript Title	
Ortho	oGrid
2.	Speakers bureau/paid presentations for a company or supplier (The following conflicts were disclosed)
3A.	Paid employee for a company or supplier (The following conflicts were disclosed)
3B.	Paid consultant for a company or supplier (The following conflicts were disclosed)
Stryk	er, Smith & Nephew, OrthoGrid, DJO Surgical
3C.	Unpaid consultants for a company or supplier (The following conflicts were disclosed)
4.	Stock or stock options in a company or supplier (The following conflicts were disclosed)
Ortho	Grid, Conextions
5.	Research support from a company or supplier as a Principal Investigator (The following conflicts were disclosed)
Stryk	er, Zimmer/Biomet
6.	Other financial or material support from a company or supplier (The following conflicts were disclosed)
7.	Royalties, financial or material support from publishers (The following conflicts were disclosed)
8.	Medical/Orthopaedic publications editorial/governing board (The following conflicts were disclosed)
Edito	rial Board for Journal of Arthroplasty
9.	Board member/committee appointments for a society (The following conflicts were disclosed)

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

Orthopaedic Video Theater Committee Member for AAOS, Education and Program Committee Member for AAHKS

Each author must sign AND print or type his/her name, date and submit a separate form

3/23/2020 Jeremy Gililland, MD Author Name (Print or Type) Date