

# 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). All items require a response. If there is no relevant disclosure for a given item, enter "None."

## Corynebacterium Periprosthetic Joint Infections

Manuscript Title

1. Royalties from a company or supplier (The following conflicts were disclosed) *None*
2. Speakers bureau/paid presentations for a company or supplier (The following conflicts were disclosed) *Deputy, Inc.*

- 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.

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12/21/2019