

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Jesus	2. Surname (Last Name) Mas Martinez	3. Date 29-August-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Javier Sanz-Reig
5. Manuscript Title RECREATIONAL SPORTS AND INTRA-ARTICULAR HIP INJURIES		
6. Manuscript Identifying Number (if you know it) _____		

Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

- Yes, the following relationships/conditions/circumstances are present (explain below):
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Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Mas Martinez has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Javier

2. Surname (Last Name)

Sanz-Reig

3. Date

29-August-2019

4. Are you the corresponding author?

Yes No

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RECREATIONAL SPORTS AND INTRA-ARTICULAR HIP INJURIES

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Section 1. Identifying Information

1. Given Name (First Name)

Carmen

2. Surname (Last Name)

Verdu Roman

3. Date

29-August-2019

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Javier Sanz-Reig

5. Manuscript Title

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Section 1. Identifying Information

1. Given Name (First Name)

David

2. Surname (Last Name)

Bustamante Suarez de Puga

3. Date

29-August-2019

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Javier Sanz-Reig

5. Manuscript Title

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Section 1. Identifying Information

1. Given Name (First Name) Enrique	2. Surname (Last Name) Martinez Gimenez	3. Date 29-August-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Javier Sanz-Reig
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1. Given Name (First Name) Manuel	2. Surname (Last Name) Morales Santias	3. Date 29-August-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Javier Sanz-Reig
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