## 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."

Post-discharge Opioid Use Following Total Hip and Total Knee Arthroplasty

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) Hanger Prosthetics one-time lecture
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) Zimmer-Biomet
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) Funding from Stryker.
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) 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) Research Committee for MSTS
Each author must sign AND print or type his/her name, date and submit a separate form	

Brock A. Lindsey, MD

author disclosures.

Author Name (Print or Type)

Author Signature

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