

Section 1.	Identifying Infor			
1. Given Name (Fin	st Name)	2 Surname (Last Name)		11/22/20
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Section 4.	Intellectual Prope	rty Patents & Copyrigh	ts	
Do you have any p	patents, whether plan	ned, pending or issued, broa	dly relevant to the work?	Yes No



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):
No other relationships/conditions/circumstances that present a potential conflict of interest
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.
Section 6. Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Evaluation and Feedback

Please visit http://www.icmie.org/cgi-bin/feedback to provide feedback on your experience with completing this form.



1. Given Name (First Name)	2. Surname (Last Name)	3. Effective Date (07-August-2008) 29 — Decembes
4. Are you the corresponding author?	Yes No	
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Did you or your institution at any time receive payment or services from a third party for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc...)?

Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**
1. Grant	V				
2. Consulting fee or honorarium	Ø				
3. Support for travel to meetings for the study or other purposes	d				
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like	Ø				
5. Payment for writing or reviewing the manuscript					
Provision of writing assistance, medicines, equipment, or administrative support					



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Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
. Board membership						
2. Consultancy	Ø					
. Employment	Ø					1
. Expert testimony	Ø	D				1
. Grants/grants pending	D					
Payment for lectures including service on speakers bureaus	Ø					•
. Payment for manuscript preparation	0	П				

<sup>\*</sup> This means money that your institution received for your efforts on this study.

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Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments
Patents (planned, pending or issued)	d				
9. Royalties	d				
Payment for development of					
educational presentations					
Stock/stock options     Travel/accommodations/		U	U		
meeting expenses unrelated to activities listed**	V				
Other (err on the side of full disclosure)					
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Yes, the following relationships/conditions/circumstances are present (explain below):



Section 1.	Identifying Int	formation	
1. Given Name (I	First Name)	2. Surname (Last Name)	3. Effective Date (07-August-2008)  17 - November - 2020
4. Are you the co	orresponding author?	Yes No	
5. Manuscript Tit Evaluation 1	of John In the	Abditacts of Systematic Course 'cl	Acta-Ambises Covering Treatments for Achelles

#### Section 2. The Work Under Consideration for Publication

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

The Work Under Consideration	for Pub	lication				
Type	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant						×
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2. Consulting fee or honorarium						×
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Support for travel to meetings for the study or other purposes	Ø					×
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2. Consulting fee or honorarium	Ø					×			
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Support for travel to meetings for the study or other purposes	A					×			
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Payment for writing or reviewing the manuscript	Ø	D				×			
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2. Consulting fee or honorarium	d					ADD X ADD
Support for travel to meetings for the study or other purposes	Ø					X
Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like	Ø					×
5. Payment for writing or reviewing the manuscript	0					ADD X
Provision of writing assistance, medicines, equipment, or administrative support						ADD ×



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3. Support for travel to meetings for the study or other purposes	d					ADD ×			
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like	d					ADD X			
Payment for writing or reviewing the manuscript	Ø					ADD ×			
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1. Given Name (First Name)	2. Surname (Last Name)	3. Effective Date (07-August-2008) 02 - DICLMOU 2006
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#### Section 2. The Work Under Consideration for Publication

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

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2. Consulting fee or honorarium		U	U			ADD
Support for travel to meetings for the study or other purposes	0					×
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Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like	Ø					×
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Payment for writing or reviewing the manuscript	Ø					×
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Provision of writing assistance, medicines, equipment, or administrative support	Ø	O				×



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4. Are you the corresponding author?  S. Manuscript Title  Control of Angle And Angle of Angl	F. Systematic Reviews and Meta analyse Tendon Repaires

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1. Grant	Ø					×
2. Consulting fee or honorarium	d					ADD ×
Support for travel to meetings for the study or other purposes	D'					ADD X
Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like	ø		0			ADD ×
Payment for writing or reviewing the manuscript	D					ADD ×
Provision of writing assistance, medicines, equipment, or administrative support	d					ADD X



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# ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Infor			The second second		
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Section 2. The Work Under					wasnest of the submitted work
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Given Name (First Name)	2. Surname (Last Name)	3. Effective Date (07-August-2008)  OR - Queenbur 2014
4. Are you the corresponding author?	Yes No	
5. Manuscript Title	the Arotectus Set not	E Laneus and Meta-applies Cours

#### Section 2. The Work Under Consideration for Publication

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

The Work Under Consideration	for Pub	lication				
Type	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments	Labers
1. Grant	V					×
2. Consulting fee or honorarium	Ø					ADD X
Support for travel to meetings for the study or other purposes	Q					×
Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like	Ø					×
Payment for writing or reviewing the manuscript	d					ADD X
Provision of writing assistance, medicines, equipment, or administrative support						ADD ×



The Work Under Consideration for Publication								
	Туре	No	Money Paid to You		Name of Entity	Comments**		
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7. Other							×	
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#### Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to submission.

Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
. Board membership						
2. Consultancy	Ø					
. Employment	Ø					1
. Expert testimony	Ø	D				1
. Grants/grants pending	D					
Payment for lectures including service on speakers bureaus	Ø					•
. Payment for manuscript preparation	0	П				

<sup>\*</sup> This means money that your institution received for your efforts on this study.

<sup>\*\*</sup> Use this section to provide any needed explanation.



Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments
Patents (planned, pending or issued)	d				
9. Royalties	d				
Payment for development of					
educational presentations					
Stock/stock options     Travel/accommodations/		U	U		
meeting expenses unrelated to activities listed**	V				
Other (err on the side of full disclosure)					
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Section 4. Other relationsh	nips				

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Yes, the following relationships/conditions/circumstances are present (explain below):



Section 1.	Identifying In	formation	
1. Given Name (F	TANDER AND THE PARTY OF THE PAR	2. Surname (Last Name)  WARD  Yes No	3. Effective Date (07-August-2008)  D1 - Decumb Lt - 2020
5. Manuscript Tit Evaluating 6. Manuscript Ide	the Spin in the	ve Apoints of Systematic Review	to i Heta-analysis Couper Treatment

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The Work Under Consideration	The Work Under Consideration for Publication									
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**					
1. Grant	Ø					×				
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2. Consulting fee or honorarium		U				×				
	1					ADD				
<ol><li>Support for travel to meetings for the study or other purposes</li></ol>						×				
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Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like		О	O			×				
						ADD				
<ol> <li>Payment for writing or reviewing the manuscript</li> </ol>	Ø					×				
						ADD				
Provision of writing assistance, medicines, equipment, or administrative support	B	D		To the second		*				



The Work U	Inder Conside	ration for Publ	lication				
	Туре	No	Money Paid to You		Name of Entity	Comments**	
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. Board membership						
2. Consultancy	Ø					
. Employment	Ø					
. Expert testimony	Ø					^
. Grants/grants pending	D					<i>'</i>
Payment for lectures including service on speakers bureaus	Ø					1
. Payment for manuscript preparation	0					^

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Patents (planned, pending or issued)	d				
9. Royalties	d				
	الا	U			
Payment for development of educational presentations	Ø				
1. Stock/stock options	d				
Travel/accommodations/ meeting expenses unrelated to activities listed**	Ø	O	0		
Other (err on the side of full disclosure)					
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Section 1.	Identifying Info	mation	
1. Given Name (F	irst Name)	2. Surname (Last Name)	3. Effective Date (07-August-2008) 05-Decumper-200
4. Are you the co	rresponding author?	Yes No	
5. Manuscript Titl Evalent 10 A 6. Manuscript Ide	le & Spip in the Hallying Nulliber (if Sol)	Apotopots of Spetematic Review a	nd Meta: analyses Covering

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

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Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant	Ø					×
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Consulting fee or honorarium	M	L				×
3. Support for travel to meetings for	d	П	П			ADD
the study or other purposes				e de la companya de l		ADD
Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like	D/					×
	,					ADD
<ol><li>Payment for writing or reviewing the manuscript</li></ol>	Ø					×
	,					ADD
Provision of writing assistance, medicines, equipment, or administrative support	Ø					*



The Work U	Inder Conside	ration for Publ	lication				
	Туре	No	Money Paid to You		Name of Entity	Comments**	
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