

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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### Section 1. Identifying Information

1. Given Name (First Name)  
Shuhei
2. Surname (Last Name)  
Otsuki
3. Date  
20-November-2021
4. Are you the corresponding author?  Yes  No
5. Manuscript Title  
Implantation of a novel meniscal scaffold for irreparable meniscal tears
6. Manuscript Identifying Number (if you know it)

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1. Given Name (First Name) Kuniaki  
2. Surname (Last Name) Ikeda  
3. Date 23-November-2021
4. Are you the corresponding author?  Yes  No  
Corresponding Author's Name  
Shuhei Otsuki
5. Manuscript Title  
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Kei
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Tanaka
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Yoshinori
2. Surname (Last Name)  
Okamoto
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**Royalties:** Funds are coming in to you or your institution due to your patent

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Masashi
2. Surname (Last Name)  
Neo
3. Date  
23-November-2021
4. Are you the corresponding author?  Yes  No Corresponding Author's Name  
Shuhei Otsuki
5. Manuscript Title  
Implantation of a novel meniscal scaffold for irreparable meniscal tears
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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