

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

5. Relationships not covered above.

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Pending: The patent has been filed but not issued

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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)

Alan

2. Surname (Last Name)

Getgood

3. Date

09-April-2021

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Biomechanical evaluation of bone block versus all soft-tissue grafts preparation with a suspensory cortical device for quadriceps tendon autograft in ACL reconstruction: a cadaveric study

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Smith and Nephew	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Section 3. Relevant financial activities outside the submitted work.

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Smith and Nephew	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Ossur	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Precision OS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Xiros Ltd	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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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Dr. Getgood reports grants from Smith and Nephew, during the conduct of the study; grants and personal fees from Smith and Nephew, grants from Ossur, personal fees from Precision OS, personal fees from Xiros Ltd, outside the submitted work; .

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Timothy

2. Surname (Last Name)

Burkhart

3. Date

13-April-2021

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Biomechanical evaluation of bone block versus all soft-tissue grafts preparation with a suspensory cortical device for quadriceps tendon autograft in ACL reconstruction: a cadaveric study

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Smith and Nephew	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Smith and Nephew provided a research grant from which I received salary support

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Dr. Burkhart reports grants from Smith and Newpew, during the conduct of the study; .

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Section 1. Identifying Information

1. Given Name (First Name)
Ryan

2. Surname (Last Name)
Degen

3. Date
09-April-2021

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Getgood

5. Manuscript Title

Biomechanical evaluation of bone block versus all soft-tissue grafts preparation with a suspensory cortical device for quadriceps tendon autograft in ACL reconstruction: a cadaveric study

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Dr. Degen has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Michelle

2. Surname (Last Name)
Arakgi

3. Date
11-April-2021

4. Are you the corresponding author? Yes No Corresponding Author's Name

5. Manuscript Title
Biomechanical Comparison of Three Suspensory Techniques for all Soft Tissue Central Quadriceps Tendon Graft Fixation

6. Manuscript Identifying Number (if you know it)

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Section 1. Identifying Information

1. Given Name (First Name)
Takashi

2. Surname (Last Name)
Hoshino

3. Date
11-April-2021

4. Are you the corresponding author? Yes No Corresponding Author's Name

5. Manuscript Title
Biomechanical evaluation of bone block versus all soft-tissue grafts preparation with a suspensory cortical device for quadriceps tendon autograft in ACL reconstruction: a cadaveric study

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