

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Isolina	2. Surname (Last Name) Boero	3. Date 27-June-2022
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jorge Chahla
5. Manuscript Title Proximal Tibiofibular Joint Reconstruction with a Semitendinosus Allograft for Chronic Instability		
6. Manuscript Identifying Number (if you know it)		

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Dr. Boero has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Fernando Gomez

2. Surname (Last Name)
Verdejo

3. Date
27-June-2022

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Jorge Chahla

5. Manuscript Title

Proximal Tibiofibular Joint Reconstruction with a Semitendinosus Allograft for Chronic Instability

6. Manuscript Identifying Number (if you know it)

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Section 1. Identifying Information

1. Given Name (First Name)

Vince

2. Surname (Last Name)

Morgan

3. Date

27-June-2022

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Jorge Chahla

5. Manuscript Title

Proximal Tibiofibular Joint Reconstruction with a Semitendinosus Allograft for Chronic Instability

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Dr. Morgan has nothing to disclose.

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1. Given Name (First Name)

Enzo

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Mameri

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27-June-2022

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Yes No

Corresponding Author's Name

Jorge Chahla

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Zeeshan

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1. Given Name (First Name) Benjamin	2. Surname (Last Name) Kerzner	3. Date 27-June-2022
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jorge Chahla
5. Manuscript Title Proximal Tibiofibular Joint Reconstruction with a Semitendinosus Allograft for Chronic Instability		
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

ICMJE Form for Disclosure of Potential Conflicts of Interest

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?

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Mr. Kerzner has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Garrett	2. Surname (Last Name) Jackson	3. Date 27-June-2022
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jorge Chahla
5. Manuscript Title Proximal Tibiofibular Joint Reconstruction with a Semitendinosus Allograft for Chronic Instability		
6. Manuscript Identifying Number (if you know it) _____		

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Are there any relevant conflicts of interest? Yes No

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Mr. Jackson has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Suhas	2. Surname (Last Name) Dasari	3. Date 27-June-2022
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jorge Chahla
5. Manuscript Title Proximal Tibiofibular Joint Reconstruction with a Semitendinosus Allograft for Chronic Instability		
6. Manuscript Identifying Number (if you know it) _____		

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Dr. Dasari has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Jorge

2. Surname (Last Name)

Chahla

3. Date

27-June-2022

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Proximal Tibiofibular Joint Reconstruction with a Semitendinosus Allograft for Chronic Instability

6. Manuscript Identifying Number (if you know it)

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Paid consultant for Arthrex, CONMED Linvatec, Ossur, Smith & Nephew
Board/Committee Member: American Orthopaedic Society for Sports Medicine, Arthroscopy Association of North America, International Society of Arthroscopy, Knee Surgery, and Orthopaedic Sports Medicine

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Dr. Chahla reports and Paid consultant for Arthrex, CONMED Linvatec, Ossur, Smith & Nephew
Board/Committee Member: American Orthopaedic Society for Sports Medicine, Arthroscopy Association of North America, International Society of Arthroscopy, Knee Surgery, and Orthopaedic Sports Medicine

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Section 1. Identifying Information

1. Given Name (First Name)

Felipe

2. Surname (Last Name)

Casanova

3. Date

27-June-2022

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Jorge Chahla

5. Manuscript Title

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6. Manuscript Identifying Number (if you know it)

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Dr. Casanova has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name) Robert	2. Surname (Last Name) Browning	3. Date 27-June-2022
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jorge Chahla
5. Manuscript Title Proximal Tibiofibular Joint Reconstruction with a Semitendinosus Allograft for Chronic Instability		
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