ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Thun
2. Surname (Last Name) Itthibanchpong
3. Date 28-December-2021
4. Are you the corresponding author? □ Yes ✔ No
   Corresponding Author’s Name Napatpong Tamrongkulsiri
5. Manuscript Title Arthroscopic-Assisted Reduction of Depressed Lateral Tibial Plateau Fracture Using Precision Drill Guide and Fresh-frozen Femoral Head Allograft
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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Dr. Itthipanichpong has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  Somsak
2. Surname (Last Name)  Kuptniratsaikul
3. Date  28-December-2021

4. Are you the corresponding author?  Yes  No
Corresponding Author’s Name  Napatpong Thamrongskulsiri

5. Manuscript Title  Arthroscopic-Assisted Reduction of Depressed Lateral Tibial Plateau Fracture Using Precision Drill Guide and Fresh-frozen Femoral Head Allograft

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Dr. Kuptniratsaikul has nothing to disclose.

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<thead>
<tr>
<th>1. Given Name (First Name)</th>
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<td>Danaithep</td>
<td>Limskul</td>
<td>28-December-2021</td>
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</table>

4. Are you the corresponding author? [ ] Yes [x] No

Corresponding Author’s Name
Napatpong Thamrongskulsiri

5. Manuscript Title
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1. Given Name (First Name)  
   Napatpong

2. Surname (Last Name)  
   Thamrongksulsiri

3. Date  
   28-December-2021

4. Are you the corresponding author?  
   ✔ Yes  ☐ No

5. Manuscript Title  
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