ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Jessica  
2. Surname (Last Name)  Nelson  
3. Date  17-December-2021  
4. Are you the corresponding author?  Yes  No  
5. Manuscript Title  Tibial Supra-tubercular Deflexion Osteotomy in the Management of Failed Anterior Cruciate Ligament Reconstruction: A Surgical Technique  
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  

Section 3. Relevant financial activities outside the submitted work.

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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

Nelson
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Section 1. Identifying Information

1. Given Name (First Name)  Dustin
2. Surname (Last Name)  Richter
3. Date  19-December-2021
4. Are you the corresponding author?  ☑ No  Corresponding Author’s Name  Jessica Nelson

5. Manuscript Title  Tibial Supra-tubercular Deflexion Osteotomy in the Management of Failed Anterior Cruciate Ligament Reconstruction: A Surgical Technique
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Are there any relevant conflicts of interest?  ☑ No

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Fellowship funding support from Arthrex & Stryker.

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Dr. Richter reports and Fellowship funding support from Arthrex & Stryker.

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Section 1. Identifying Information

1. Given Name (First Name)  WASCHER
2. Surname (Last Name)  DANIEL
3. Date  19-December-2021

4. Are you the corresponding author?  ☑ No

5. Manuscript Title
Tibial Supra-tubercular Deflexion Osteotomy in the Management of Failed Anterior Cruciate Ligament Reconstruction: A Surgical Technique

6. Manuscript Identifying Number (if you know it)

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Dr. Wascher has nothing to disclose.

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Dr. Treme reports other from Arthrex/Gemini Mountain Medical, outside the submitted work; .

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Section 1. Identifying Information

1. Given Name (First Name)  
   Gehron

2. Surname (Last Name)  
   Treme

3. Date  
   19-December-2021

4. Are you the corresponding author?  
   □ Yes  ✔ No  
   Corresponding Author’s Name

5. Manuscript Title  
   Manuscript Title: Tibial Supra-tubercular Deflexion Osteotomy in the Management of Failed Anterior Cruciate Ligament Reconstruction: A Surgical Technique

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Are there any relevant conflicts of interest?  
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Are there any relevant conflicts of interest?  
   ✔ Yes  □ No  
   If yes, please fill out the appropriate information below.

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<th>Name of Entity</th>
<th>Grant?</th>
<th>Personal Fees?</th>
<th>Non-Financial Support?</th>
<th>Other?</th>
<th>Comments</th>
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<td>⬜</td>
<td>⬜</td>
<td>✔</td>
<td>educational support for resident arthroscopic skill training course - travel, housing, food</td>
</tr>
</tbody>
</table>

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
   □ Yes  ✔ No

Gehron  
Treme
### Section 1. Identifying Information

1. Given Name (First Name)  
   robert
2. Surname (Last Name)  
   schenck
3. Date  
   19-December-2021

4. Are you the corresponding author?  
   □ Yes  
   ✔ No
   Corresponding Author’s Name  
   Jessica Nelson

5. Manuscript Title  
   Tibial Supra-tubercular Deflexion Osteotomy in the Management of Failed Anterior Cruciate Ligament Reconstruction: A Surgical Technique

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   ✔ No

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Dr. Schenck has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
Lisandro

2. Surname (Last Name)  
Nardin

3. Date  
19-December-2021

4. Are you the corresponding author?  
☐ Yes  ☑ No  
Corresponding Author's Name  
Jessica A Nelson

5. Manuscript Title  
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Dr. Nardin has nothing to disclose.

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