ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Hannah

2. Surname (Last Name)  
   Bradsell

3. Date  
   03-May-2021

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   ☒ No

   Corresponding Author's Name  
   Rachel M. Frank

5. Manuscript Title  
   In-Office Diagnostic Needle Arthroscopy Using the NanoScope™ Arthroscopy System

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Ms. Bradsell has nothing to disclose.

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Alex

2. Surname (Last Name)  
Lencioni

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03-May-2022

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Rachel M. Frank

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1. Given Name (First Name)
   Kevin

2. Surname (Last Name)
   Shinsako

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   03-May-2022

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   Corresponding Author’s Name
   Rachel M. Frank

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Shinsako
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Rachel

2. Surname (Last Name)  
Frank

3. Date  
03-May-2022

4. Are you the corresponding author?  
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<th>Personal Fees?</th>
<th>Non-Financial Support?</th>
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