ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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1. Identifying information.

2. The work under consideration for publication.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Jordan
2. Surname (Last Name)  
   Liles
3. Date  
   29-April-2022
4. Are you the corresponding author?  
   Yes  Yes  No
   Corresponding Author's Name
   Jonathan Godin

5. Manuscript Title  
   Treatment of the 'The Naked Humeral Head': Repair of Supraspinatus Avulsion, Subscapularis Tear, and Humeral Avulsion of the Glenohumeral Ligament
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Are there any relevant conflicts of interest?  
   Yes  Yes  No

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Fossum
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Bradley
2. Surname (Last Name)  Fossum
3. Date  29-April-2022

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

5. Manuscript Title
   Treatment of the 'The Naked Humer Head': Repair of Supraspinatus Avulsion, Subscapularis Tear, and Humeral Avulsion of the Glenohumeral Ligament

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1. Given Name (First Name)  Mitchell
2. Surname (Last Name)  Mologne
3. Date  29-April-2022
4. Are you the corresponding author?  Yes  No  Corresponding Author's Name  Jonathan Godin

5. Manuscript Title
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Su
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Section 1. Identifying Information

1. Given Name (First Name)  
Charles

2. Surname (Last Name)  
Su

3. Date  
29-April-2022

4. Are you the corresponding author?  
☑ Yes  
☐ No  
Corresponding Author's Name  
Jonathan Godin

5. Manuscript Title  
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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.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to publication.

Are there any relevant conflicts of interest?  [ ] Yes  [ ] No

If yes, please fill out the appropriate information below.

<table>
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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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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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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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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Godin reports personal fees from Bioventus, personal fees from Smith & Nephew, personal fees from Mitek, outside the submitted work.

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.