

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

1. Identifying information.

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4. Intellectual Property.

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

5. Relationships not covered above.

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Other: Anything not covered under the previous three boxes

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Licensed: The patent has been licensed to an entity, whether earning royalties or not

Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Phinit

2. Surname (Last Name)
Phisitkul

3. Date
03-January-2018

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

5. Manuscript Title
Perspectives in Treatments of End-stage Ankle Arthritis among Orthopaedic Surgeons: Analysis of an American Orthopaedic Foot and Ankle Society (AOFAS) Member Survey

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Are there any relevant conflicts of interest? ☒ Yes ☐ No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Arthrex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Paid Consultant
First Ray	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Stocks
Mortise Medical	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Stocks

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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Dr. Phisitkul reports other from Arthrex, other from First Ray, other from Mortise Medical, outside the submitted work; .

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Natalie

2. Surname (Last Name)
Glass

3. Date
25-September-2017

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Phinit Phisitkul

5. Manuscript Title
Perspectives in Treatments of End-stage Ankle Arthritis among Orthopaedic Surgeons: Analysis of an American Orthopaedic Foot and Ankle Society (AOFAS) Member Survey

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Dr. Glass has nothing to disclose.

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1. Given Name (First Name)
Patrick

2. Surname (Last Name)
Ebeling

3. Date
25-September-2017

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name
Phinit Phisitkul

5. Manuscript Title
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ICMJE

INTERNATIONAL COMMITTEE of
MEDICAL JOURNAL EDITORS

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Sandra

2. Surname (Last Name)
Klein

3. Date
26-September-2017

4. Are you the corresponding author?

☐

Yes

☒

No

Corresponding Author's Name

Phinit Phisitkul

5. Manuscript Title

Perspectives in Treatments of End-stage Ankle Arthritis among Orthopaedic Surgeons: Analysis of an American Orthopaedic Foot and Ankle Society (AOFAS) Member Survey

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Section 1. Identifying Information

1. Given Name (First Name)

Jeffrey

2. Surname (Last Name)

Johnson

3. Date

26-September-2017

4. Are you the corresponding author?

☐ Yes

☒ No

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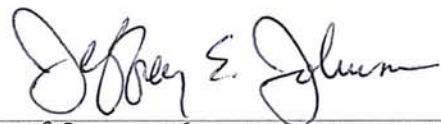
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