

# INDIVIDUAL CONFLICT OF INTEREST STATEMENT

## *American Association of Hip and Knee Surgeons*

(Adopted from the American Academy of Orthopaedic Surgeons disclosure statement)

The following form **must be filled out completely and submitted by each author (example, 6 authors, 6 forms).** **All items require a response. If there is no relevant disclosure for a given item, enter "None."**

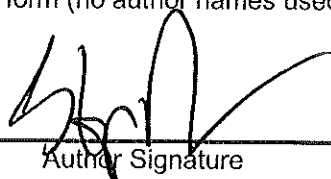
### Manuscript Title

1. Royalties from a company or supplier (The following conflicts were disclosed)  
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J. of Arthroplasty; JAAOS
9. Board member/committee appointments for a society (The following conflicts were disclosed)  
BOC; Kentucky Orthopaedic Society

**Each author must sign AND print or type his/her name, date and submit a separate form**

In addition, one BLINDED Conflict of Interest form (no author names used) should be submitted per manuscript with all author disclosures.

Stephen Duncan  
Author Name (Print or Type)

  
Author Signature

8/21/19  
Date