

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Øyvind

2. Surname (Last Name) Håberg

3. Date 28-June-2023

4. Are you the corresponding author? Yes No

5. Manuscript Title
The incidence of late-detected developmental dysplasia of the hip and their functional outcomes: A 17-years observational study using selective ultrasound screening

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

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

| Name of Institution/Company | Grant? | Personal Fees? | Non-Financial Support? | Other? | Comments |
|--------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|-----------------|
| Helse Møre og Romsdal Hospital Trust | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | PhD scholarship |

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

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

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Section 6. Disclosure Statement

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Dr. Håberg reports grants from Helse Møre og Romsdal Hospital Trust, during the conduct of the study; .

Evaluation and Feedback

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Section 1. Identifying Information

| | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|----------------------------------------------|
| 1. Given Name (First Name) Olav A | 2. Surname (Last Name) Foss | 3. Date 29-June-2023 |
| 4. Are you the corresponding author? | <input type="checkbox"/> Yes <input type="checkbox"/> No | Corresponding Author's Name Øyvind Håberg |
| 5. Manuscript Title The incidence of late-detected developmental dysplasia of the hip and their functional outcomes: A 17-years observational study using selective ultrasound screening | | |
| 6. Manuscript Identifying Number (if you know it) | | |

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Section 1. Identifying Information

| | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|----------------------------------------------|
| 1. Given Name (First Name) Trude | 2. Surname (Last Name) Gundersen | 3. Date 04-July-2023 |
| 4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Corresponding Author's Name Øyvind Håberg |
| 5. Manuscript Title The incidence of late-detected developmental dysplasia of the hip and their functional outcomes: A 17-years observational study using selective ultrasound screening | | |
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Oystein 2. Surname (Last Name) Lian 3. Date 30-June-2023

4. Are you the corresponding author? Yes No Corresponding Author's Name
Øyvind Håberg

5. Manuscript Title
The incidence of late-detected developmental dysplasia of the hip and their functional outcomes: A 17-years observational study using selective ultrasound screening

6. Manuscript Identifying Number (if you know it)

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| | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|----------------------------------------------|
| 1. Given Name (First Name) Myrthle Slettvåg | 2. Surname (Last Name) Hoel | 3. Date 29-June-2023 |
| 4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Corresponding Author's Name Øyvind Håberg |
| 5. Manuscript Title The incidence of late-detected developmental dysplasia of the hip and their functional outcomes: A 17-years observational study using selective ultrasound screening | | |
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| | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|----------------------------------------------|
| 1. Given Name (First Name) Ketil | 2. Surname (Last Name) Holen | 3. Date 29-June-2023 |
| 4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Corresponding Author's Name Øyvind Håberg |
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