

ICMJE DISCLOSURE FORM

Date: 8/21/2023

Your Name: Fredrik Olerud

Manuscript Title: Comminution and inadequate reduction are associated with conversion to total knee arthroplasty within 2 years after surgical treatment of 439 tibial plateau fractures: An observational cohort study

Manuscript Number (if known): [Click or tap here to enter text.]

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

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4	Consulting fees	<input checked="" type="checkbox"/> None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input checked="" type="checkbox"/> None	
6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> None	
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input checked="" type="checkbox"/> None	

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11	Stock or stock options	<input checked="" type="checkbox"/> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

Please place an "X" next to the following statement to indicate your agreement:

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: 8/21/2023

Your Name: Anne Garland

Manuscript Title: Comminution and inadequate reduction are associated with conversion to total knee arthroplasty within 2 years after surgical treatment of 439 tibial plateau fractures: An observational cohort study.

Manuscript Number (if known): [Click or tap here to enter text.](#)

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9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 15px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> </table>									
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; height: 15px;">President of the Swedish Orthopaedic Association</td> <td style="width: 50%;"></td> </tr> <tr><td style="height: 15px;"></td><td></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> </table>	President of the Swedish Orthopaedic Association								
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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: 11/23/2023

Your Name: Nils P. Hailer]

Manuscript Title: Risk of conversion to total knee arthroplasty after surgically treated tibial plateau fractures: An observational cohort study of 439 patients]

Manuscript Number (if known): 17389

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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3	Royalties or licenses	<input type="checkbox"/> None	
		Waldemar Link GmbH Co KG, Hamburg, Germany	
4	Consulting fees	<input checked="" type="checkbox"/> None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input type="checkbox"/> None	
		Waldemar Link GmbH Co KG, Hamburg, Germany	Honoraria for lectures/educational events
		Zimmer Biomet, Warsaw, USA	Honoraria for lectures/educational events
		Heraeus Medical, Wehrheim, Germany	Honoraria for lectures/educational events
6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> None	
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input type="checkbox"/> None	
		STOP Leg Clots trial	
10	Leadership or fiduciary role in other board,	<input type="checkbox"/> None	

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	society, committee or advocacy group, paid or unpaid	<ul style="list-style-type: none"> – Scientific advisor to the Swedish National Board of Health and Welfare – Board member of Swedish Arthroplasty Register – Chairman of Nordic Association of Arthroplasty Registers (NARA) – Chairman of Swedish Orthopaedic Professors' Convent – Chairman of Biobank Sweden (National infrastructure funded by Swedish Research Council) 	No payments received
11	Stock or stock options	<input checked="" type="checkbox"/> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	
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Date: 8/21/2023

Your Name: Olof Wolf

Manuscript Title: Comminution and inadequate reduction are associated with conversion to total knee arthroplasty within 2 years after surgical treatment of 439 tibial plateau fractures: An observational cohort study.

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