

ICMJE DISCLOSURE FORM

Date: 4/8/2024

Your Name: [Dr. med. Christian Peez]

Manuscript Title: [Fragment Size of Lateral Hoffa Fractures Determines Screw Fixation Trajectory – A Cross-Sectional Cadaveric Study]

Manuscript Number (if known): AO-2023-457/R2 RESUBMISSION - (17637)

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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Your Name: [Ivan Zderic, PhD]

Manuscript Title: [Fragment Size of Lateral Hoffa Fractures Determines Screw Fixation Trajectory – A Cross-Sectional Cadaveric Study]

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ICMJE DISCLOSURE FORM

Date: 4/8/2024

Your Name: [Dr. med. Adrian Deichsel]

Manuscript Title: [Fragment Size of Lateral Hoffa Fractures Determines Screw Fixation Trajectory – A Cross-Sectional Cadaveric Study]

Manuscript Number (if known): AO-2023-457/R2 RESUBMISSION - (17637)

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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: 4/8/2024

Your Name: Boyko Gueorguiev, PhD

Manuscript Title: Fragment Size of Lateral Hoffa Fractures Determines Screw Fixation Trajectory – A Cross-Sectional Cadaveric Study

Manuscript Number (if known): AO-2023-457/R2 RESUBMISSION - (17637)

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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ICMJE DISCLOSURE FORM

Date: 4/8/2024

Your Name: [PD Dr. med. Christoph Kittl]

Manuscript Title: [Fragment Size of Lateral Hoffa Fractures Determines Screw Fixation Trajectory – A Cross-Sectional Cadaveric Study]

Manuscript Number (if known): AO-2023-457/R2 RESUBMISSION - (17637)

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ICMJE DISCLOSURE FORM

Date: 4/8/2024

Your Name: [Prof. Dr. med. Michael Raschke]

Manuscript Title: [Fragment Size of Lateral Hoffa Fractures Determines Screw Fixation Trajectory – A Cross-Sectional Cadaveric Study]

Manuscript Number (if known): AO-2023-457/R2 RESUBMISSION - (17637)

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ICMJE DISCLOSURE FORM

Date: 4/8/2024

Your Name: [PD Dr. med. Elmar Herbst, PhD]

Manuscript Title: [Fragment Size of Lateral Hoffa Fractures Determines Screw Fixation Trajectory – A Cross-Sectional Cadaveric Study]

Manuscript Number (if known): AO-2023-457/R2 RESUBMISSION - (17637)

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