ICMJE DISCLOSURE FORM

Date:	11/18/24		
Your Name: Levent Dumenci			
Manusc	ript Title: Using KOOS-PS to validate dichotomous global ratings of improvement or worsening following	3	
total knee arthroplasty			
Manuscript number (if known):			

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 following questions apply to the author's relationships/activities/interests as they relate to the <u>current manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. 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.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initial	planning of the work
1	All support for the present	xNone	
	manuscript (e.g., funding, provision of study materials,		
	medical writing, article		
	processing charges, etc.) No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	xNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	xNone	
4	Consulting fees	xNone	

5	Payment or honoraria for	xNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	xNone	
	testimony		
7	Support for attending meetings and/or travel	xNone	
8	Patents planned, issued or	xNone	
	pending		
9	Participation on a Data	xNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	xNone	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	xNone	
12	Receipt of equipment,	xNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	xNone	
	financial interests		

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

X 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:	11/18/24
Your Na	me:Daniel Riddle
Manusc	ript Title: Using KOOS-PS to validate dichotomous global ratings of improvement or worsening following
total kn	ee arthroplasty
Manusc	ript number (if known):
	•

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 following questions apply to the author's relationships/activities/interests as they relate to the <u>current manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. 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.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initial	planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	xNone	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	NIH, VA, Pfizer and Orthopaedic Research and Education funding	
3	Royalties or licenses	x_None	

Sample S	4	Consulting fees	xNone	
lectures, presentations, speakers bureaus, manuscript writing or educational events 6 Payment for expert testimony 7 Support for attending meetings and/or travel 8 Patents planned, issued or pending 9 Participation on a Data Safety Monitoring Board or Advisory Board 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid 11 Stock or stock options 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services 13 Other financial or non-				
lectures, presentations, speakers bureaus, manuscript writing or educational events 6 Payment for expert testimony 7 Support for attending meetings and/or travel 8 Patents planned, issued or pending 9 Participation on a Data Safety Monitoring Board or Advisory Board 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid 11 Stock or stock options 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services 13 Other financial or non-				
speakers bureaus, manuscript writing or educational events 6	5		x_None	
manuscript writing or educational events Payment for expert testimony Support for attending meetings and/or travel Patents planned, issued or pending Participation on a Data Safety Monitoring Board or Advisory Board Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid Stock or stock options Receipt of equipment, materials, drugs, medical writing, gifts or other services To other financial or non- Manuscript writing equipment, materials, drugs, medical writing, gifts or other services Mone Lx_None				
educational events Payment for expert testimony Support for attending meetings and/or travel Patents planned, issued or pending Participation on a Data Safety Monitoring Board or Advisory Board Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid Stock or stock options Receipt of equipment, materials, drugs, medical writing, gifts or other services Other financial or non- Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid Tother financial or non- Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid Tother financial or non- Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid society, committee or advocacy group and the paid or unpaid society				
Farticipation on a Data Safety Monitoring Board or Advisory Board 10 Leadership or fluciary role in other board, society, committee or advocacy group, paid or unpaid 11 Stock or stock options 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services 13 Other financial or non- X_None				
testimony Support for attending meetings and/or travel Because of the poard, society, committee or advocacy group, paid or unpaid Receipt of equipment, materials, drugs, medical writing, gifts or other services Support for attending meetings and or ax_None x_None			v. Nana	
Support for attending meetings and/or travel 8 Patents planned, issued or pending 9 Participation on a Data Safety Monitoring Board or Advisory Board 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid 11 Stock or stock options 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services 13 Other financial or non- X_None	ь		xnone	
meetings and/or travel		•		
8 Patents planned, issued or pending 9 Participation on a Data Safety Monitoring Board or Advisory Board 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid 11 Stock or stock options 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services 13 Other financial or non- S None	7		xNone	
pending Participation on a Data Safety Monitoring Board or Advisory Board Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid Stock or stock options Receipt of equipment, materials, drugs, medical writing, gifts or other services Receipt of equipment, materials, drugs, medical writing, gifts or other services A None A None A None A None A None A None				
pending Participation on a Data Safety Monitoring Board or Advisory Board Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid Stock or stock options Receipt of equipment, materials, drugs, medical writing, gifts or other services Receipt of equipment, materials, drugs, medical writing, gifts or other services A None A None A None A None A None A None				
9 Participation on a Data Safety Monitoring Board or Advisory Board 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid 11 Stock or stock options 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services 13 Other financial or non- X_None	8		s_None	
Safety Monitoring Board or Advisory Board 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid 11 Stock or stock options 2 Receipt of equipment, materials, drugs, medical writing, gifts or other services 13 Other financial or non- 2 X_None 3 Safety Monitoring Board or Advisory Board 2 x_None 3 x_None 4 STOCK OF STOCK OPTION STOCK S		pending		
Safety Monitoring Board or Advisory Board 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid 11 Stock or stock options 2 Receipt of equipment, materials, drugs, medical writing, gifts or other services 13 Other financial or non- 2 X_None 3 Safety Monitoring Board or Advisory Board 2 x_None 3 x_None 4 STOCK OF STOCK OPTION STOCK S				
Advisory Board Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid Stock or stock options Receipt of equipment, materials, drugs, medical writing, gifts or other services Advisory Board x_None x_None x_None x_None x_None x_None x_None x_None	9	•	x_None	
10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid 11 Stock or stock options 2 Receipt of equipment, materials, drugs, medical writing, gifts or other services 13 Other financial or non- 2 x_None 2 x_None 3 x_None 4 x_None 5 x_None 5 x_None 6 x_None				
in other board, society, committee or advocacy group, paid or unpaid 11 Stock or stock options xNone 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services 13 Other financial or nonxNone		•		
committee or advocacy group, paid or unpaid 11 Stock or stock options xNone 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services 13 Other financial or nonxNone	10		x_None	
group, paid or unpaid Stock or stock options xNone 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services 13 Other financial or nonxNone				
12 Receipt of equipment, materials, drugs, medical writing, gifts or other services 13 Other financial or nonx_None				
materials, drugs, medical writing, gifts or other services 13 Other financial or nonx_None	11	Stock or stock options	x_None	
materials, drugs, medical writing, gifts or other services 13 Other financial or nonx_None				
materials, drugs, medical writing, gifts or other services 13 Other financial or nonx_None				
writing, gifts or other services 13 Other financial or nonx_None	12		x_None	
services 13 Other financial or nonx_None				
13 Other financial or nonx_None				
 -	13		x None	
		financial interests		

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

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