

ICMJE DISCLOSURE FORM

Date: 3/24/2024

Your Name: Irmola Tero

Manuscript Title: Assessment of improvement in functional outcomes between a novel knee replacement design and conventional designs in 240 knees: A randomized controlled trial

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.

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| Time frame: Since the initial planning of the work | | | | | | | | |
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| 12 | Receipt of equipment, materials, drugs, medical writing, gifts or other services | <input checked="" type="checkbox"/> None | |
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| 13 | Other financial or non-financial interests | <input checked="" type="checkbox"/> None | |
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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: 3/20/2024

Your Name: Aleksi Reito

Manuscript Title: Assessment of improvement in functional outcomes between a novel knee replacement design and conventional designs in 240 knees: A randomized controlled trial

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.

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| | | Zimmer-Biomet travel expense for education | |
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ICMJE DISCLOSURE FORM

Date: 3/24/2024

Your Name: Kangas Jarmo

Manuscript Title: Assessment of improvement in functional outcomes between a novel knee replacement design and conventional designs in 240 knees: A randomized controlled trial

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

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ICMJE DISCLOSURE FORM

Date: 3/22/2024

Your Name: Antti Eskelinen

Manuscript Title: Assessment of improvement in functional outcomes between a novel knee replacement design and conventional designs in 240 knees: A randomized controlled trial

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

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| | | Heraeus Medical GmbH | Lecture fee |
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ICMJE DISCLOSURE FORM

Date: 3/20/2024

Your Name: Mika Niemeläinen

Manuscript Title: Assessment of improvement in functional outcomes between a novel knee replacement design and conventional designs in 240 knees: A randomized controlled trial

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

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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: 3/20/2024

Your Name: Ville Mattila

Manuscript Title: Assessment of improvement in functional outcomes between a novel knee replacement design and conventional designs in 240 knees: A randomized controlled trial

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.

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ICMJE DISCLOSURE FORM

Date: 12/15/2024

Your Name: Teemu Moilanen

Manuscript Title: Assessment of improvement in functional outcomes between a novel knee replacement design and conventional designs in 240 patients: A randomized controlled trial

Manuscript Number (if known): AO-2024-101

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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