ICMJE DISCLOSURE FORM

Date: 1/25/2025

Your Name: TJN van der Lelij

Manuscript Title: Does RSA testing of TKA implants result in lower long-term revision risk? A Dutch arthroplasty register 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.

		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.**	☐ **None**	
		Stryker	This investigator-initiated study was supported by an institutional grant from Stryker. The sponsor did not take part in the design, conduct, analyses, or interpretations in the present study.
			Click the tab key to add additional rows.
Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	☒ **None**	
3	Royalties or licenses	☒ **None**	

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

		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)
11	Stock or stock options	☒ **None**	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	☒ **None**	
13	Other financial or non-financial interests	☒ **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: 20-01-2025
Your Name: Bart G Pijls
Manuscript Title: Does RSA testing of TKA implants result in lower long-term revision risk? A Dutch Arthroplasty Register Study
Manuscript number (if known):

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

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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.**	None	
Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	Veni Grant ZonMw (dutch government)	Paid to my institution; subject induction heating for PJI
		Off-road grant by ZonMw (dutch) government)	Paid to my institution; subject induction heating for PJI
		Starter Grant NOW/VWS	Paid to my institution; subject induction heating for PJI

3	Royalties or licenses	____None	
4	Consulting fees	____None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	____None	
6	Payment for expert testimony	____None	
7	Support for attending meetings and/or travel	____None	
8	Patents planned, issued or pending	Inventor on a patent application held by the Leiden University Medical Center (WO2020/067898) on induction heating.	Inventor fee received from institution after completion of milestone.
9	Participation on a Data Safety Monitoring Board or Advisory Board	____None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	I hold a position as Medical Director Dutch Arthroplasty Register (LROI)	Paid position
		I am a member of Expert member EU for medical devices (2. Orthopaedics, traumatology, rehabilitation, rheumatology)	Paid per dossier. https://health.ec.europa.eu/medical-devices-expert-panels/experts/expert-panels_en
11	Stock or stock options	____None	
12	Receipt of equipment, materials, drugs, medical	____None	

	writing, gifts or other services		
13	Other financial or non-financial interests	____None	

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ICMJE DISCLOSURE FORM

Date: 1/24/2025

Your Name: Bart Kaptein

Manuscript Title: Does RSA testing of TKA implants result in lower long-term revision risk? A Dutch arthroplasty register study

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

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Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	☒ **None**	
3	Royalties or licenses	☒ **None**	

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4	Consulting fees	☒ **None**	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	☒ **None**	
6	Payment for expert testimony	☒ **None**	
7	Support for attending meetings and/or travel	☒ **None**	
8	Patents planned, issued or pending	☒ **None**	
9	Participation on a Data Safety Monitoring Board or Advisory Board	☒ **None**	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	☐ **None**	
		Board member of International Radiostereometry Society	

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11	Stock or stock options	☒ **None**	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	☒ **None**	
13	Other financial or non-financial interests	☒ **None**	

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ICMJE DISCLOSURE FORM

Date: 1/20/2025

Your Name: LN van Steenbergen

Manuscript Title: Does RSA testing of TKA implants result in lower long-term revision risk? A Dutch arthroplasty register study

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

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Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	☒ **None**	
3	Royalties or licenses	☒ **None**	

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

		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)
11	Stock or stock options	☒ **None**	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	☒ **None**	
13	Other financial or non-financial interests	☒ **None**	

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ICMJE DISCLOSURE FORM

Date: 1/20/2025

Your Name: Prof.dr. RGHH Nelissen

Manuscript Title: Does RSA testing of TKA implants result in lower long-term revision risk? A Dutch arthroplasty register study

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

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			Click the tab key to add additional rows.
Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	☐ **None**	
		EU Horizon2020 grant	Horizon2020 CORE-MD, payments to institution
		Dutch Arthroplasty Registry foundation	
		NWO (Dutch Research fund) DartBAc	Paid to institution
3	Royalties or licenses	☒ **None**	

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4	Consulting fees	☒ **None**	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	☒ **None**	
6	Payment for expert testimony	☒ **None**	
7	Support for attending meetings and/or travel	☒ **None**	
8	Patents planned, issued or pending	☐ **None**	
		Inventor on a patent application held by the Leiden University Medical Center (WO2020/067898) on induction heating	Inventor fee received from institution after completion of milestone.
9	Participation on a Data Safety Monitoring Board or Advisory Board	☒ **None**	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	☐ **None**	
		Chair Expert Panels under MDR Orthopaedics, traumatology, rehabilitation, rheumatology)	Paid per dossier. https://health.ec.europa.eu/medical-devices-expert-panels/experts/expert-panels_en
		Vice president EFORT	Non paid

		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)
11	Stock or stock options	☒ **None**	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	☒ **None**	
13	Other financial or non-financial interests	☒ **None**	

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ICMJE DISCLOSURE FORM

Date: 1/17/2025

Your Name: P.J. Marang-van de Mheen

Manuscript Title: Does RSA testing of TKA implants result in lower long-term revision risk? A Dutch arthroplasty register study

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

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			Click the tab key to add additional rows.
		Time frame: past 36 months	
2	Grants or contracts from any entity (if not indicated in item #1 above).	☒ **None**	
3	Royalties or licenses	☒ **None**	

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

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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	☒ **None**	
13	Other financial or non-financial interests	☒ **None**	

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