

## ICMJE DISCLOSURE FORM

**Date:** 10/7/2025

**Your Name:** Colton Poitras

**Manuscript Title:** The Manitoba Joint Replacement Registry: Validation of a provincial hip and knee arthroplasty registry

**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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<b>12</b>	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> <b>None</b>	
<b>13</b>	Other financial or non-financial interests	<input type="checkbox"/> <b>None</b>	
		Orthopaedic Innovation Centre	Employer

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:** 10/10/2025

**Your Name:** Christiaan Righolt

**Manuscript Title:** The Manitoba Joint Replacement Registry: Validation of a provincial hip and knee arthroplasty registry

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

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## ICMJE DISCLOSURE FORM

**Date:** 10/7/2025

**Your Name:** Eric Bohm

**Manuscript Title:** Trends and predictors of cemented fixation in arthroplasty for hip fractures: A Canadian Joint Replacement Registry study

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

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		Stryker Canada	Me
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input type="checkbox"/> None	
		Stryker Canada	Me
6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
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		International Society of Arthroplasty Registries, Canadian Arthroplasty Society, Canadian Joint Replacement Registry Advisory Committee, various local roles	Unpaid

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		Smith and Nephew, Orthopaedic Innovation Centre	Dinner
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