

ICMJE DISCLOSURE FORM

Date: 12/5/2025

Your Name: [Jan Egil Brattgjerd]

Manuscript Title: [Long-term implant retention after impacted ESIN in paediatric diaphyseal forearm fractures: a retrospective cohort 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.

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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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Date: 12/5/2025

Your Name: [Christer Aasheim]

Manuscript Title: [Long-term implant retention after impacted ESIN in paediatric diaphyseal forearm fractures: a retrospective cohort study]

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

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Date: 12/5/2025

Your Name: [Astrid Rosenberg]

Manuscript Title: [Long-term implant retention after impacted ESIN in paediatric diaphyseal forearm fractures: a retrospective cohort study]

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Date: 12/5/2025

Your Name: [Christoffer Fotland]

Manuscript Title: [Long-term implant retention after impacted ESIN in paediatric diaphyseal forearm fractures: a retrospective cohort study]

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

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Date: 12/5/2025

Your Name: [Vera Halvorsen]

Manuscript Title: [Long-term implant retention after impacted ESIN in paediatric diaphyseal forearm fractures: a retrospective cohort study]

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