CONFLICT OF INTEREST STATEMENT
American Association of Hip and Knee Surgeons
(Adopted from the American Academy of Orthopaedic Surgeons disclosure statement)

The following form must be filled out completely and submitted by each author (example, 6 authors, 6 forms). All items require a response. If there is no relevant disclosure for a given item, enter "None."

Catastrophic Failure of an OXINIUM Femoral Head – A Case Report

Manuscript Title

1. Royalties from a company or supplier (The following conflicts were disclosed)
   None

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   None

3A. Paid employee for a company or supplier (The following conflicts were disclosed)
    None

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    None

4. Stock or stock options in a company or supplier (The following conflicts were disclosed)
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5. Research support from a company or supplier as a Principal Investigator (The following conflicts were disclosed)
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    None

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Each author must sign AND print or type his/her name, date and submit a separate form

In addition, one BLINDED Conflict of Interest form (no author names used) should be submitted per manuscript with all author disclosures.

Afshin Anoushiravani Afshin Anoushiravani 4/30/18
Author Name (Print or Type) Author Signature Date