

ICMJE DISCLOSURE FORM

Date: 8/26/2021

Your Name: Prof Lesley Ann Anderson

Manuscript Title: Stakeholder Prioritisation Preferences for Individuals Awaiting Hip and Knee Arthroplasty: The PATHWAY (Prioritisation of Those aWaiting hip and knee Arthroplasty) Study

Manuscript Number (if known): BJJ-2024-0178.R1

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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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.	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; height: 40px; margin-top: 5px;"> <tr><td style="width: 60%;"></td><td style="width: 40%;"></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table> <div style="text-align: right; font-size: small; color: gray;">Click the tab key to add additional rows.</div>						
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	society, committee or advocacy group, paid or unpaid		
11	Stock or stock options	<input checked="" type="checkbox"/> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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: 8/6/2024

Your Name: Nick Clement

Manuscript Title: Stakeholder Prioritisation Preferences for Individuals Awaiting Hip and Knee Arthroplasty: The PATHWAY (Prioritisation of Those Awaiting hip and knee Arthroplasty) Study

Manuscript Number (if known): BJJ-2024-0178.R1

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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: 6/8/2024

Your Name: Luke Farrow

Manuscript Title: Stakeholder Prioritisation Preferences for Individuals Awaiting Hip and Knee Arthroplasty: The PATHWAY (Prioritisation of Those awaiting hip and knee Arthroplasty) Study

Manuscript Number (if known): BJJ-2024-0178.R1

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	society, committee or advocacy group, paid or unpaid	British Orthopaedic Association Associate Sub-Specialty Lead for Elective Orthopaedics	Unpaid
		Immediate Past Chair of the Scottish Hip Fracture Audit Quality Improvement and Research Subgroup	Unpaid
11	Stock or stock options	<input checked="" type="checkbox"/> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	
<p>Please place an "X" next to the following statement to indicate your agreement:</p> <p><input checked="" type="checkbox"/> I certify that I have answered every question and have not altered the wording of any of the questions on this form.</p>			

ICMJE DISCLOSURE FORM

Date: 8/13/2024

Your Name: Katie Gillies

Manuscript Title: Stakeholder Prioritisation Preferences for Individuals Awaiting Hip and Knee Arthroplasty: The PATHWAY (Prioritisation of Those aWaiting hip and knee Arthroplasty) Study

Manuscript Number (if known): BJJ-2024-0178.R1

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Date: 8/26/2021

Your Name: R M Dominic Meek

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ICMJE DISCLOSURE FORM

Date: 8/12/2024

Your Name: Mandy Ryan

Manuscript Title: Stakeholder Prioritisation Preferences for Individuals Awaiting Hip and Knee Arthroplasty: The PATHWAY (Prioritisation of Those aWaiting hip and knee Arthroplasty) Study

Manuscript Number (if known): BJJ-2024-0178.R1

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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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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ICMJE DISCLOSURE FORM

Date: 8/22/2024

Your Name: Diane Smith

Manuscript Title: R1 Stakeholder Prioritisation Preferences for individuals awaiting hip and knee arthroplasty: The PATHWAY study.

Manuscript Number (if known): BJJ-2024-0178.R1

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