ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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**Section 1. Identifying Information**

| 1. Given Name (First Name) | 2. Surname (Last Name) | 3. Date          |
|---------------------------|-------------------------|------------------|
| Kai                       | Chen                    | 26-January-2021  |

4. Are you the corresponding author?  
   - [ ] Yes  
   - [x] No  

   Corresponding Author's Name: Yang Yang

5. Manuscript Title

   Risk factors related to the loss of reduction after acromioclavicular joint dislocation treated with the EndoButton device

6. Manuscript Identifying Number (if you know it)

   ATM-21-404

**Section 2. The Work Under Consideration for Publication**

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Are there any relevant conflicts of interest?  
   - [ ] Yes  
   - [x] No

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Dr. Chen has nothing to disclose.

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**Section 1. Identifying Information**

| 1. Given Name (First Name) | 2. Surname (Last Name) | 3. Date               |
|---------------------------|------------------------|-----------------------|
| Bin                      | Xu                     | 26-January-2021       |

4. Are you the corresponding author? □ Yes   ✔ No

Corresponding Author’s Name
Yang Yang

5. Manuscript Title
Risk factors related to the loss of reduction after acromioclavicular joint dislocation treated with the EndoButton device

6. Manuscript Identifying Number (if you know it)
ATM-21-404

**Section 2. The Work Under Consideration for Publication**

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? □ Yes   ✔ No

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Are there any relevant conflicts of interest? □ Yes   ✔ No

**Section 4. Intellectual Property -- Patents & Copyrights**

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? □ Yes   ✔ No

Xu
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| 1. Given Name (First Name) | 2. Surname (Last Name) | 3. Date |
|---------------------------|------------------------|---------|
| Yang-Jun                  | Lao                    | 26-January-2021 |

4. Are you the corresponding author? [Yes] [No]  
Corresponding Author’s Name: Yang Yang

5. Manuscript Title  
Risk factors related to the loss of reduction after acromioclavicular joint dislocation treated with the EndoButton device

6. Manuscript Identifying Number (if you know it)  
ATM-21-404

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Chen
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   Kai

2. Surname (Last Name)  
   Chen

3. Date  
   26-January-2021

4. Are you the corresponding author?  
   ☑ Yes  ☒ No  
   Corresponding Author’s Name  
   Yang Yang

5. Manuscript Title  
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