CONFLICT OF INTEREST STATEMENT
Arthroplasty Today
(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). If no discloser is required, please write/type “none” at the end of each sentence.

Manuscript Title: Total knee arthroplasty case report in multiple sclerosis: can we optimize future outcomes?

1. Royalties from a company or supplier (The following conflicts were disclosed)
   \[none\]

2. Speakers bureau/paid presentations for a company or supplier (The following conflicts were disclosed)
   \[none\]

3A. Paid employee for a company or supplier (The following conflicts were disclosed)
   \[none\]

3B. Paid consultant for a company or supplier (The following conflicts were disclosed)
   \[none\]

3C. Unpaid consultants for a company or supplier (The following conflicts were disclosed)
   \[none\]

4. Stock or stock options in a company or supplier (The following conflicts were disclosed)
   \[none\]

5. Research support from a company or supplier as a Principal Investigator (The following conflicts were disclosed)
   \[none\]

6. Other financial or material support from a company or supplier (The following conflicts were disclosed)
   \[none\]

7. Royalties, financial or material support from publishers (The following conflicts were disclosed)
   \[none\]

8. Medical/Orthopaedic publications editorial/governing board (The following conflicts were disclosed)
   \[none\]

9. Board member/committee appointments for a society (The following conflicts were disclosed)
   \[none\]

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.

Katherine Knox.  
BB  
Oct 26/2015

Author Name (Print or Type)  Author Signature  Date