

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.

Identifying information.

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Royalties: Funds are coming in to you or your institution due to your

Falk Riecke 1



Section 1. Identifying Inform	nation			
1. Given Name (First Name) Anja	n Name (First Name) 2. Surname (Last Name) 3. Date Falk Riecke 08-January-2017			
4. Are you the corresponding author?	the corresponding author? Yes No Corresponding Author's Name Kristoffer Weisskirchner Barfod			
5. Manuscript Title Validity and Reliability of an Ultrasound	d Measurement of the free	length of the Achilles tendon		
6. Manuscript Identifying Number (if you kr	now it)			
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Section 2. The Work Under C	onsideration for Public	cation		
	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,		
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Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No		

Falk Riecke 2



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Dr. Falk Riecke has nothing to disclose.

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Boesen 1



Section 1. Identifying Infor	n 1. Identifying Information			
1. Given Name (First Name) Anders	2. Surname (Last Name) Boesen	3. Date 12-December-2016		
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Kristoffer Weisskirchner Barfod		
5. Manuscript Title Validity and Reliability of an Ultrasoun	d Measurement of the free	length of the Achilles tendon		
6. Manuscript Identifying Number (if you l	know it)			
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Hansen

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Royalties: Funds are coming in to you or your institution due to your

1

administrative support, etc.



Section 1. Identifying Inform	mation			
1. Given Name (First Name) Philip	2. Surname (Last Name) Hansen	3. Date 25-January-2017		
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Kristoffer Weisskirchner Barfod		
5. Manuscript Title Validity and Reliability of an Ultrasoun	d Measurement of the free	length of the Achilles tendon		
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Maier 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fii Jens Friedrich	rst Name)	2. Surname (Last Name) Maier	3. Date 25-January-2017	
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Kristoffer Weisskirchner Barfod	
5. Manuscript Title Validity and Relia		Measurement of the free	length of the Achilles tendon	
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Døssing 1



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4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Kristoffer Weisskirchner Barfod
5. Manuscript Title Validity and Relia		Measurement of the free	length of the Achilles tendon
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Troelsen 1



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5. Manuscript Title Validity and Reliability	uscript Title y and Reliability of an Ultrasound Measurement of the free length of the Achilles tendon					
6. Manuscript Identifying	Number (if you knov	v it)				
Section 2. The	Work Under Con	sideration for Pu	ıblication			
Did you or your institution any aspect of the submitte statistical analysis, etc.)? Are there any relevant o	ed work (including bu	ut not limited to grant				.) for
Section 3. Rele	vant financial ac	tivities outside t	he submitted wo	ork.		
Place a check in the app of compensation) with clicking the "Add +" bo Are there any relevant of If yes, please fill out the	entities as describe x. You should repor conflicts of interest	ed in the instruction rt relationships that?	s. Use one line for ϵ	each entity; add as mar	ny lines as you need	
Name of Entity		Grant? Personal Fees?	Non-Financial Support?	comments		
Zimmer Biomet		✓		✓ Advisory Board		
Section 4. Intel	llectual Property	Patents & Cop	yrights			
Do you have any paten	ts, whether planne	d, pending or issue	d, broadly relevant	to the work? Yes	√ No	

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Section 5. Polationships not sovered above
Relationships not covered above
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?
Yes, the following relationships/conditions/circumstances are present (explain below):
✓ No other relationships/conditions/circumstances that present a potential conflict of interest
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements On occasion, journals may ask authors to disclose further information about reported relationships.
Section 6. Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Troelsen reports grants and other from Zimmer Biomet, outside the submitted work; .

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.

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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.

Identifying information.

2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

3. Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

Relationships not covered above.

Use this section to report other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work.

Definitions.

Entity: government agency, foundation, commercial sponsor, academic institution, etc.

Grant: A grant from an entity, generally [but not always] paid to your organization

Personal Fees: Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

Non-Financial Support: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

Other: Anything not covered under the previous three boxes

Pending: The patent has been filed but not issued

Issued: The patent has been issued by the agency

Licensed: The patent has been licensed to an entity, whether earning royalties or not

Royalties: Funds are coming in to you or your institution due to your patent

Barfod 1



Section 1. Identifyi	ing Information			
Given Name (First Name) Kristoffer Weisskirchner	2. Surname Barfod	(Last Name)		3. Date 19-December-2017
4. Are you the corresponding a	author? Yes [No		
5. Manuscript Title Validity and Reliability of an	Ultrasound Measuremer	nt of the free length of	the Achilles tend	don
6. Manuscript Identifying Num	ber (if you know it)			
Section 2. The Worl	k Under Consideratio	n for Publication		
Did you or your institution at an any aspect of the submitted wo statistical analysis, etc.)?				ommercial, private foundation, etc.) for esign, manuscript preparation,
Are there any relevant conflicts of interest? Yes Vo				
Section 3. Relevant	financial activities o	utside the submitte	d work.	
of compensation) with entitical clicking the "Add +" box. You	ies as described in the ins u should report relations	structions. Use one line hips that were present	for each entity;	elationships (regardless of amount add as many lines as you need by months prior to publication.
Are there any relevant confli If yes, please fill out the app				
	3 Pd	orsonal Non-Einansia	, ,	
Name of Entity	Grant 6	ersonal Non-Financia Fees? Support?	" Other Co	mments
OJO Global	✓			
Arthrex	✓			
Section 4. Intellect	ual Property Patent	s & Convrights		
Do you have any patents, wh			vant to the work	x?
20 you have any paterits, wi	icalier planned, pending	o. Issued, broudly fele	valie to the work	

Barfod 2



Section 5.				
Section 5.	Relationships not covered above			
	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?			
Yes, the following relationships/conditions/circumstances are present (explain below):				
✓ No other relationships/conditions/circumstances that present a potential conflict of interest				
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements rnals may ask authors to disclose further information about reported relationships.			
Section 6.	Disclosure Statement			
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.				
Dr. Barfod repor	ts grants from DJO Global, grants from Arthrex, outside the submitted work; .			

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.

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