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## DECLARATION OF FINANCIAL INTERESTS AND RELATIONSHIPS

### Option 1

Name: Caitlin Orner, MD

Organisation: Cedars Sinai Kerlan Jobe Orthopaedic Clinic

Presentation / Submission Title: Hip Arthroscopy after Total Hip Arthroplasty:  
A PearlDiver Database Study

I confirm that I and / or any co-authors have the following financial interests or relationships to disclose with regard to the subject matter of this presentation / submission:

TYPE OF INTEREST	DESCRIPTION
<i>Please tick all applicable</i>	<i>Please detail activity(s)</i>
Grant / Research Support <input checked="" type="checkbox"/>	Michael Banffy reports the following disclosures: -Arthrex, Inc: Paid consultant; Paid presenter or speaker and Research support
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Signed: Caitlin Orner

Dated: 4/29/2023

## DECLARATION OF FINANCIAL INTERESTS AND RELATIONSHIPS

### ***Option 2***

Name: \_\_\_\_\_

Organisation: \_\_\_\_\_

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