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# PLEASE COMPLETE AS APPROPRIATE ONE OF THE DECLARATIONS BELOW AND UPLOAD THIS WITH YOUR ABSTRACT SUBMISSION.

TYPE OF INTEREST	DESCRIPTION
Invited Faculty Presenters Submitters	<ul> <li>Where an individual may get direct financial benefits from a relationship with industry.</li> <li>This could, for example, include: <ul> <li>Employment</li> <li>Ownership of stocks and shares</li> <li>Travel and accommodation expenses paid</li> <li>Paid consultancy or directorship</li> <li>Patent ownership</li> <li>Patent ownership of speakers' panels / bureaus and advisory boards</li> <li>Acting as an expert witness</li> <li>Being in receipt of a fellowship, equipment, writing, or administrative support</li> <li>Writing or consulting for a medical education promotional or communications company</li> </ul> </li> </ul>

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## DECLARATION OF FINANCIAL INTERESTS AND RELATIONSHIPS

#### **Option 1**

Name: Mario Hevesi

Organisation: Mayo Clinic

Presentation / Submission Title: Primary hip arthroscopy in patients with acetabular dysplasia:

A systematic review of published clinical outcomes at minimum 5-year follow-up

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
Please tick all applicab	le	Please detail activity(s) Mario Hevesi: Smith+Nephew Inc.: Education   Medwest Associates: Education   Medical Device Business Services, Inc.: Travel and Lodging   Stryker Corporation: Food and Beverage   DePuy Synthes Sales Inc.: Travel and Lodging, Food and Beverage   DJO - Enovis: Paid consultant   Journal of Cartilage and Joint Preservation: Editorial or governing board   Moximed: Paid consultant   Vericel: Paid consultant. Hospitality from Medical Device Business Services; education payments from Medwest Associates, Smith+Nephew.
Grant / Research Support		
Consultancy	$\checkmark$	
Research		
Speaker Bureau		
Employment		
Other		
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### DECLARATION OF FINANCIAL INTERESTS AND RELATIONSHIPS

#### **Option 2**

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

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