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Date: 23/04-2025

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Your name: Michelle Wulff Østerskov

Manuscript title: Inappropriate Polypharmacy: Medication Review in a Geriatric Patient

Manuscript number (if known):

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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Time frame: past 36 months

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3	Royalties or licenses	<input checked="" type="checkbox"/> None	

4	Consulting fees	<input checked="" type="checkbox"/> None	

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9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> None	

10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input checked="" type="checkbox"/> None	

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Your name: Frederik Viggo Lauthrup Esmann

Manuscript title: Inappropriate Polypharmacy: Medication Review in a Geriatric

Manuscript number (if known):

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Date: 25/04-2025 Klik eller tryk for at angive en dato.

Your name: David Peick Sonne

Manuscript title: Inappropriate Polypharmacy: Medication Review in a Geriatric Patient

Manuscript number (if known):

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Date: 24/04-2025 Klik eller tryk for at angive en dato.

Your name: Ida Marie Heerfordt

Manuscript title: Inappropriate Polypharmacy: Medication Review in a Geriatric Patient

Manuscript number (if known):

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Your name: Henrik Horwitz

Manuscript title: Inappropriate Polypharmacy: Medication Review in a Geriatric Patient

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