

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

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

5. Relationships not covered above.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Anita	2. Surname (Last Name) Ringberg	3. Date 28-July-2013
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Peder Ikander
5. Manuscript Title Indication for breast reduction: introduction of a simple objective criterion		
6. Manuscript Identifying Number (if you know it)		

Section 2. The Work Under Consideration for Publication

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Dr. Ringberg has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Anne

2. Surname (Last Name)
Quirinia

3. Date
28-July-2013

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Peder Ikander

5. Manuscript Title
Indication for breast reduction: introduction of a simple objective criterion

6. Manuscript Identifying Number (if you know it)

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Dr. Quirinia has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Hans Erik	2. Surname (Last Name) Siersen	3. Date 28-July-2013
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Peder Ikander
5. Manuscript Title Indication for breast reduction: introduction of a simple objective criterion		
6. Manuscript Identifying Number (if you know it)		

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Dr. Siersen has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Helle	2. Surname (Last Name) Sjøstrand	3. Date 28-July-2013
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Peder Ikander
5. Manuscript Title Indication for breast reduction: introduction of a simple objective criterion		
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1. Given Name (First Name)
Jennifer

2. Surname (Last Name)
Bjerg Drej e

3. Date
28-July-2013

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Yes No

Corresponding Author's Name
Peder Ikander

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4. Are you the corresponding author? Yes No

5. Manuscript Title
Indication for breast reduction, introduction of a simple objective criterion

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Ikander has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Steen	2. Surname (Last Name) Henrik Matzen	3. Date 28-July-2013
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Peder Ikander
5. Manuscript Title Indication for breast reduction: introduction of a simple objective criterion		
6. Manuscript Identifying Number (if you know it)		

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Dr. Henrik Matzen has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Susanne

2. Surname (Last Name)
Lambaa

3. Date
28-July-2013

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Peder Ikander

5. Manuscript Title
Indication for breast reduction: introduction of a simple objective criterion

6. Manuscript Identifying Number (if you know it)

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Lisbet

2. Surname (Last Name)
Rosenkrantz Hölmich

3. Date
28-July-2013

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Peder Ikander

5. Manuscript Title
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Pavia

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Lumholt

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