

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Jenny Dahl	2. Surname (Last Name) Knudsen	3. Date 12-January-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Dina Cortes
5. Manuscript Title Impact of cleaning before sampling midstream urine in children.		
6. Manuscript Identifying Number (if you know it)		

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Dr. Knudsen 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)
Dina

2. Surname (Last Name)
Cortes

3. Date
12-January-2014

4. Are you the corresponding author? Yes No

5. Manuscript Title
Impact of cleaning before sampling midstream urine in children.

6. Manuscript Identifying Number (if you know it)

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Dr. Cortes has nothing to disclose.

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1. Given Name (First Name) Marianne	2. Surname (Last Name) Soendergaard Khinchi	3. Date 12-January-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Dina Cortes
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1. Given Name (First Name) Steen	2. Surname (Last Name) Ladelund	3. Date 12-January-2014
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Rebekka

2. Surname (Last Name)
Lytzen

3. Date
12-January-2014

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Yes No

Corresponding Author's Name
Dina Cortes

5. Manuscript Title
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