

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.

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Licensed: The patent has been licensed to an entity, whether earning royalties or not

Royalties: Funds are coming in to you or your institution due to your patent

ICMJJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Mette Bach

2. Surname (Last Name)

Larsen

3. Date

10-February-2014

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Screeningsmammografi til asymptomatiske kvinder henvist af egen læge til udredning for brystkræft

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

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

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Dr. Larsen has nothing to disclose.

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ICMJJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Vivian	2. Surname (Last Name) Langagergaard	3. Date 16-February-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Mette Bach Larsen
5. Manuscript Title Udviklingsartikel: Screeningsmammografi til asymptomatiske kvinder henvist af egen læge til udredning for brystkræft		
6. Manuscript Identifying Number (if you know it)		

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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Langagergaard 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) Heidi	2. Surname (Last Name) Larsson	3. Date 12-February-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Mette Bach Larsen
5. Manuscript Title Screeningsmammografi til asymptomatiske kvinder henvist af egen læge til udredning for brystkræft		
6. Manuscript Identifying Number (if you know it)		

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H. Larsson 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)

Ellen Margrethe

2. Surname (Last Name)

Mikkelsen

3. Date

13-February-2014

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Mette Bach Larsen

5. Manuscript Title

Screeningsmammografi til asymptomatiske kvinder henvist af egen læge til udredning for brystkræft

6. Manuscript Identifying Number (if you know it)

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Dr. Mikkelsen has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Berit

2. Surname (Last Name)
Andersen

3. Date
15-February-2014

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Mette Bach Larsen

5. Manuscript Title

Screeningsmammografi til asymptomatiske kvinder henvist af egen læge til udredning for brystkræft

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I am head of Department of Public Health programs in Central Denmark Region. The department is responsible for administration and coordination of breast cancer screening in the region.

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Dr. Andersen reports and I am head of Department of Public Health programs in Central Denmark Region. The department is responsible for administration and coordination of breast cancer screening in the region. .

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