

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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2. The work under consideration for publication.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Niels Anker
2. Surname (Last Name)
Peterslund
3. Date
4. Are you the corresponding author? Yes No
5. Manuscript Title
Almindelig variabel immundefekt kan vise sig som en multisystemsygdom
6. Manuscript Identifying Number (if you know it)
UFL-01-13-0021.R3

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Dr. Peterslund Has nothing to disclose

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1. Given Name (First Name)

Rasmus Møller

2. Surname (Last Name)

Jørgensen

3. Date

10-July-2013

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Niels Anker Peterslund

5. Manuscript Title

Almindelig variabel immundefekt kan vise sig som en multisystems sygdom

6. Manuscript Identifying Number (if you know it)

UFL-01-13-0021.R3

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1. Given Name (First Name)
Annebirthe Bo

2. Surname (Last Name)
Hansen

3. Date
10-July-2013

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Niels Anker Peterslund

5. Manuscript Title
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Stephen

2. Surname (Last Name)
Cannon

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10-July-2013

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Yes No

Corresponding Author's Name
Niels Peterslund

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