

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Karen Bay

2. Surname (Last Name)

König

3. Date

04-July-2014

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Signe Hermansen

5. Manuscript Title

Retrospektiv analyse af 334 medicinske korttidsindlæggelser af ældre patienter med fokus på alternative løsninger til hospitalsindlæggelse

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest? Yes No

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Dr. König has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Lars

2. Surname (Last Name)

Petersen

3. Date

07-July-2014

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

Signe Hermansen

5. Manuscript Title

Retrospektiv analyse af 334 medicinske korttidsindlæggelser af ældre patienter med fokus på alternative løsninger til hospitalsindlæggelse

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Dr. Petersen has nothing to disclose.

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1. Given Name (First Name)

Lars

2. Surname (Last Name)

Rytter

3. Date

04-July-2014

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

Signe Hermansen

5. Manuscript Title

Analyse af 334 medicinske korttidsindlæggelser af ældre patienter med fokus på alternative løsninger

6. Manuscript Identifying Number (if you know it)

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Dr. Rytter 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) Ove	2. Surname (Last Name) Andersen	3. Date 22-August-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Signe Hermansen
5. Manuscript Title Analyse af 334 medicinske korttidsindlæggelser af ældre patienter med fokus på alternative løsninger		
6. Manuscript Identifying Number (if you know it)		

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Section 1. Identifying Information

1. Given Name (First Name)
Signe

2. Surname (Last Name)
Hermansen

3. Date
03-July-2014

4. Are you the corresponding author? Yes No

5. Manuscript Title
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1. Given Name (First Name)

Yves

2. Surname (Last Name)

Sales

3. Date

04-July-2014

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Signe Hermansen

5. Manuscript Title

Analyse af 334 medicinske korttidsindlæggelser af ældre patienter med fokus på alternative løsninger

6. Manuscript Identifying Number (if you know it)

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5. Manuscript Title Analyse af 334 medicinske korttidsindlæggelser af ældre patienter med fokus på alternative løsninger		
6. Manuscript Identifying Number (if you know it)		

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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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Gertrude

2. Surname (Last Name)

Ellekilde

3. Date

03-July-2014

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Signe Hermansen

5. Manuscript Title

Retrospektiv analyse af 334 medicinske korttidsindlæggelser af ældre patienter med fokus på alternative løsninger til hospitalsindlæggelse

6. Manuscript Identifying Number (if you know it)

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