

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Jenny

2. Surname (Last Name)
Korsgaard Villadsen

3. Date
13-July-2013

4. Are you the corresponding author? Yes No

5. Manuscript Title
Lægers kendskab til Battered Child Syndrome i danske akutmodtagelser er mangelfuld Survey i 7 danske akutmodtagelser

6. Manuscript Identifying Number (if you know it)

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Dr. Korsgaard Villadsen 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) Ann	2. Surname (Last Name) Buhl Bersang	3. Date 13-July-2013
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jenny Korsgaard Villadsen
5. Manuscript Title Lægers kendskab til Battered Child Syndrome i danske akutmodtagelser er mangelfuld Survey i 7 danske akutmodtagelser		
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Dr. Buhl Bersang 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)

Rikke

2. Surname (Last Name)

Thorninger

3. Date

16-July-2013

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

Jenny Korsgaard Villadsen

5. Manuscript Title

Lægers kendskab til Battered Child Syndrome i danske akutmodtagelser er mangelfuld
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1. Given Name (First Name)
Bjarne

2. Surname (Last Name)
Møller-Madsen

3. Date
16-July-2013

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Jenny Korsgaard Villadsen

5. Manuscript Title
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