

ICMJJE 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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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Jesper	2. Surname (Last Name) Kjærgaard	3. Date 30-October-2013
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jakob Hartvig Thomsen
5. Manuscript Title Indikationsområdet for nye orale antikoagulantia omfatter ikke mekaniske hjerteklapper		
6. Manuscript Identifying Number (if you know it)		

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Dr. Kjærsgaard 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)

Jakob Hartvig

2. Surname (Last Name)

Thomsen

3. Date

31-October-2013

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Indikationsområdet for nye orale antikoagulantia omfatter ikke mekaniske hjerteklapper

6. Manuscript Identifying Number (if you know it)

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Dr. Thomsen has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Laura Trolle	2. Surname (Last Name) Saust	3. Date 30-October-2013
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jakob Hartvig Thomsen
5. Manuscript Title Indikationsområdet for nye orale antikoagulantia omfatter ikke mekaniske hjerteklapper		
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Section 1. Identifying Information

1. Given Name (First Name)
Kristian

2. Surname (Last Name)
Wachtell

3. Date
30-October-2013

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Jakob Hartvig Thomsen

5. Manuscript Title
Indikationsområdet for nye orale antikoagulantia omfatter ikke mekaniske hjerteklapper

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Dr. Wachtell has nothing to disclose.

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