

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Christian

2. Surname (Last Name)  
Wejse

3. Date  
09-December-2014

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Maria Joanna Alexandraki

5. Manuscript Title

Intestinal tuberkulose, en sjælden differentiadiagnose til Crohn 's sygdom hos etniske danskere

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. Wejse 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)

Lena Hagelskjær

2. Surname (Last Name)

Kristensen

3. Date

09-December-2014

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

Maria Joanna Alexandraki

5. Manuscript Title

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Dr. Lena Hagelskjær Kristensen has nothing to disclose.

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|  |   |   |
|--|---|---|
| 1. Given Name (First Name)<br>Mette  | 2. Surname (Last Name)<br>Esbjörn                                   | 3. Date<br>09-December-2014                             |
| 4. Are you the corresponding author?   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name<br>Maria Joanna Alexandraki |
| 5. Manuscript Title<br>Intestinal tuberkulose, en sjælden differentiadiagnose til Crohn 's sygdom hos etniske danskere |   |   |
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Dr. Esbjørn has nothing to disclose.

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1. Given Name (First Name)  
Maria Joanna

2. Surname (Last Name)  
Alexandraki

3. Date  
09-December-2014

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