

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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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Lene Bastrup

2. Surname (Last Name)
Jørgensen

3. Date
09-May-2014

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Ina Quist

5. Manuscript Title
Tværfaglig journal club øger kompetencer og tværfagligt engagement hos hospitalsansatte

6. Manuscript Identifying Number (if you know it)

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Dr. Jørgensen 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) Lone Ramer	2. Surname (Last Name) Mikkelsen	3. Date 09-May-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Ina Qvist
5. Manuscript Title Tværfaglig Journal Club øger kompetencer og tværfagligt engagement hos hospitalsansatte		
6. Manuscript Identifying Number (if you know it)		

Section 2. The Work Under Consideration for Publication

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Dr. Mikkelsen has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Ina
2. Surname (Last Name)
Qvist
3. Date
12-May-2014
4. Are you the corresponding author? Yes No
5. Manuscript Title
Tværfaglig Journal Club øger kompetencer og tværfagligt engagement hos hospitalsansatte
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1. Given Name (First Name)
Rikke

2. Surname (Last Name)
Aarhus

3. Date
09-May-2014

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Ina Qvist

5. Manuscript Title
Tværfaglig Journal Club øger kompetencer og tværfagligt engagement hos hospitalsansatte

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2. Surname (Last Name)
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