

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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ICMJJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Katrine

2. Surname (Last Name)

B. Spangenberg

3. Date

14-October-2014

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Screening af nyfødte med pulsoximetri kan hindre kredsløbskollaps forårsaget af medfødt hjertesygdom

6. Manuscript Identifying Number (if you know it)

UFL-10-14-0531

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Are there any relevant conflicts of interest? Yes No

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Dr. B. Spangenberg 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) Morten	2. Surname (Last Name) Helvind	3. Date 15-October-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Katrine Bredsdorff Spangenberg
5. Manuscript Title Screening af nyfødte med pulsoximetri kan hindre kredsløbskollaps forårsaget af medfødt hjertesygdom		
6. Manuscript Identifying Number (if you know it) UFL-10-14-0531		

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Dr. Helvind has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

James

2. Surname (Last Name)

Dodd

3. Date

15-October-2014

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Katrine Bredsdorff Spangenberg

5. Manuscript Title

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Section 1. Identifying Information

1. Given Name (First Name)

Hilde Hylland

2. Surname (Last Name)

Uhlving

3. Date

12-October-2014

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Månedens billede

6. Manuscript Identifying Number (if you know it)

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