

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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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)
Natasa

2. Surname (Last Name)
Brkovic

3. Date
09-July-2015

4. Are you the corresponding author? Yes No

5. Manuscript Title
Acute renal failure and severe hemolytic anemia after infectious mononucleosis

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Dr. Brkovic has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Kit Riegels	2. Surname (Last Name) Jørgensen	3. Date 09-July-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Natasa Brkovic
5. Manuscript Title Acute renal failure and severe hemolytic anemia after infectious mononucleosis		
6. Manuscript Identifying Number (if you know it)		

Section 2. The Work Under Consideration for Publication

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Dr. Jørgensen has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Erling Bjerregaard

2. Surname (Last Name)

Pedersen

3. Date

13 07 2015

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Natasa Brkovic

5. Manuscript Title

Akut nyresvigt og svær hæmolytisk anæmi efter infektiøs mononukleosis

6. Manuscript Identifying Number (if you know it)

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Section 1. Identifying Information

1. Given Name (First Name) Jeppe Bakkestrøm	2. Surname (Last Name) Rosenbæk	3. Date 11-July-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Natasa Brkovic
5. Manuscript Title Akut nyresvigt og svær hæmolytisk anæmi efter infektiøs mononukleose		
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