

## 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.

#### 1. Identifying information.

#### 2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

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This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

#### 5. Relationships not covered above.

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**Other:** Anything not covered under the previous three boxes

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**Royalties:** Funds are coming in to you or your institution due to your patent

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Marianne Ingerslev	2. Surname (Last Name) Holt	3. Date 30-December-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Erik Lerkevang Grove
5. Manuscript Title Udredning for uerkendt cancer hos patienter med idiopatisk venøs trombose		
6. Manuscript Identifying Number (if you know it)		

### Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest?  Yes  No

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Are there any relevant conflicts of interest?  Yes  No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

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### Section 5. Relationships not covered above

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Dr. Holt 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)  
Søren Tang

2. Surname (Last Name)  
Knudsen

3. Date  
30-December-2014

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Erik Lerkevang Grove

5. Manuscript Title  
Udredning for uerkendt cancer hos patienter med idiopatisk venøs trombose

6. Manuscript Identifying Number (if you know it)

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Dr. Knudsen 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)

Birthe Søgaaard

2. Surname (Last Name)

Andersen

3. Date

30-December-2014

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

Erik Lerkevang Grove

5. Manuscript Title

Udredning for uerkendt cancer hos patienter med idiopatisk venøs trombose

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Dr. Andersen 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) Erik	2. Surname (Last Name) Grove	3. Date 30-December-2014
4. Are you the corresponding author? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
5. Manuscript Title Udredning for uerkendt cancer hos patienter med idiopatisk venøs trombose		
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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Are there any relevant conflicts of interest?     Yes     No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
AstraZeneca	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Advisory Board
Bayer	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Advisory Board
Bristol-Myers Squibb	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Advisory Board
Lecture fees received from AstraZeneca, Baxter, Bayer, Pfizer, Boehringer Ingelheim, and Sysmex.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Travel/accommodations/meeting expenses unrelated to activities listed (Pfizer, Bayer, Bristol-Myers Squibb and Boehringer-Ingelheim)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	I have received no direct financial support, but I have received flight tickets and accommodation during participation in congresses. Support from these companies: Pfizer, Bayer, Bristol-Myers Squibb, and Boehringer-Ingelheim.
Consultancy fee from Pfizer	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I have previously received a fee for helping building and testing a website (VTEpro.dk)

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

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Dr. Grove reports personal fees from AstraZeneca, personal fees from Bayer, personal fees from Bristol-Myers Squibb, personal fees from Lecture fees received from AstraZeneca, Baxter, Bayer, Pfizer, Boehringer Ingelheim, and Sysmex., non-financial support from Travel/accommodations/meeting expenses unrelated to activities listed (Pfizer, Bayer, Bristol-Myers Squibb and Boehringer-Ingelheim), personal fees from Consultancy fee from Pfizer, outside the submitted work; .

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