

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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2. The work under consideration for publication.

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4. Intellectual Property.

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Pending: The patent has been filed but not issued

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Licensed: The patent has been licensed to an entity, whether earning royalties or not

ICMJJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Sanne

2. Surname (Last Name)

Jespersen

3. Date

31-July-2015

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Behandling af ebola - hvor langt er vi?

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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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Jespersen 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)

Merete

2. Surname (Last Name)

Storgaard

3. Date

03-August-2015

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Sanne Jespersen

5. Manuscript Title

"Behandling af ebola - hvor langt er vi?"

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Storgaard has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Christian

2. Surname (Last Name)
Wejse

3. Date
02-August-2015

4. Are you the corresponding author? Yes No
Corresponding Author's Name
Sanne Jespersen

5. Manuscript Title
Behandling af ebola - hvor langt er vi?

6. Manuscript Identifying Number (if you know it)
UFL-07-15-0629

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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
BMS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Undervisningshonorar
Astellas	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Undervisningshonorar
Jannssen	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Støtte til opbygning af database

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Dr. Wejse reports personal fees from BMS, personal fees from Astellas, grants from Jannssen, outside the submitted work; .

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

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1. Given Name (First Name)

Cecilie

2. Surname (Last Name)

Norup Thomsen

3. Date

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 Yes No

Corresponding Author's Name

Sanne Jespersen

5. Manuscript Title

Behandlingen af Ebola - hvor langt er vi?

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Dr. Norup Thomsen has nothing to disclose.

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