

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Jane

2. Surname (Last Name)

Simonsen

3. Date

08-June-2014

4. Are you the corresponding author?

Yes  No

5. Manuscript Title

Hydronefrose hos den gravide kvinde: Aflastning eller ej?

Forslag til udredning og behandling

6. Manuscript Identifying Number (if you know it)

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

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Dr. Simonsen 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)  
Steen

2. Surname (Last Name)  
Walter

3. Date  
06-June-2014

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Jane Simonsen

5. Manuscript Title  
HYDRONEFROSE HOS DEN GRAVIDE KVINDE: AFLASTNING ELLER EJ?

6. Manuscript Identifying Number (if you know it)  
?

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

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Dr. WALTER has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name) Ole	2. Surname (Last Name) Graumann	3. Date 26-June-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jane Simonsen
5. Manuscript Title Hydronefroze hos den gravide kvinde: Aflastning eller ej? Forslag til udredning og behandling		
6. Manuscript Identifying Number (if you know it) UFL-06-14-0360		

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Anja

2. Surname (Last Name)  
Toft

3. Date  
14-July-2014

4. Are you the corresponding author?  Yes  No

5. Manuscript Title  
Hydronefroze hos den gravide kvinde: Aflastning eller ej?

6. Manuscript Identifying Number (if you know it)  
UFL-06-14-0360

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

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Dr. Toft has nothing to disclose.

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1. Given Name (First Name)

Carsten Ulrik

2. Surname (Last Name)

Henriques

3. Date

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

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