

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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Other: Anything not covered under the previous three boxes

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

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)

Anita Sylvest

2. Surname (Last Name)

Andersen

3. Date

16-June-2015

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Graviditet - en temporær risikofaktor for venøs tromboemboli

6. Manuscript Identifying Number (if you know it)

UFL-03-15-0233

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Section 6. Disclosure Statement

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Dr. Andersen has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)

Thomas

2. Surname (Last Name)

Bergholt

3. Date

17-June-2015

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

Anita Sylvest Andersen

5. Manuscript Title

Graviditet - en temporær risikofaktor for venøs tromboemboli

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Dr. Bergholt 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) Jannie Dalby	2. Surname (Last Name) Salvig	3. Date 20-June-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Anita Sylvest Andersen
5. Manuscript Title Graviditet - en temporær risikofaktor for venøs tromboemboli		
6. Manuscript Identifying Number (if you know it) UFL-03-15-0233		

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Section 1. Identifying Information

1. Given Name (First Name) Anne-Mette	2. Surname (Last Name) Hvas	3. Date 19-June-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name _____
5. Manuscript Title Graviditet - en temporær risikofaktor for venøs tromboemboli		
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