

## 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) Asger	2. Surname (Last Name) Eller	3. Date 10-December-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Michael Festersen Nielsen
5. Manuscript Title Behandling af akut cholecystitis hos gravide i 3. trimester		
6. Manuscript Identifying Number (if you know it) UFL-12-15-0954		

### 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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Dr. Eller 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)

Louise

2. Surname (Last Name)

Sigvardt

3. Date

10-December-2015

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

Michael Festersen Nielsen

5. Manuscript Title

Behandling af akut cholecystitis hos gravide i 3. trimester

6. Manuscript Identifying Number (if you know it)

UFL-12-15-0954

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

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Dr. Sigvardt 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)  
Michael Festersen

2. Surname (Last Name)  
Nielsen

3. Date  
04-December-2015

4. Are you the corresponding author?  Yes  No

5. Manuscript Title  
Behandling af akut cholecystitis hos gravide i 3. trimester

6. Manuscript Identifying Number (if you know it)  
UFL-12-15-0954

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Dr. Nielsen has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name) Peter	2. Surname (Last Name) Rask	3. Date 10-December-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Michael Festersen Nielsen
5. Manuscript Title Behandling af akut cholecystitis hos gravide i 3. trimester		
6. Manuscript Identifying Number (if you know it) UFL-12-15-0954		

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Dr. Rask has nothing to disclose.

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Susy

2. Surname (Last Name)

Shim

3. Date

10-December-2015

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Yes

No

Corresponding Author's Name

Michael Festersen Nielsen

5. Manuscript Title

Behandling af akut cholecystitis hos gravide i 3. trimester

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Dr. Shim has nothing to disclose.

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