

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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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)
Katrine

2. Surname (Last Name)
Schou-Jensen

3. Date
07-March-2016

4. Are you the corresponding author? Yes No

5. Manuscript Title
Ny metode til fjernelse af fastsiddende metalringe omkring penis ved brug af et almindeligt kondom

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Dr. Schou-Jensen has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)

Søren Marker

2. Surname (Last Name)

Jensen

3. Date

07-March-2016

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

Katrine Schou-Jensen

5. Manuscript Title

Ny metode til fjernelse af fastsiddende metalringe omkring penis ved brug af et almindeligt kondom

6. Manuscript Identifying Number (if you know it)

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Dr. Jensen has nothing to disclose.

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Rasmus

2. Surname (Last Name)

Bisbjerg

3. Date

07-March-2016

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 Yes No

Corresponding Author's Name

Katrine Schou-Jensen

5. Manuscript Title

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Amy Patel

2. Surname (Last Name)

Jørgensen

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07-March-2016

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Yes No

Corresponding Author's Name

Katrine Schou-Jensen

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