

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Julie

2. Surname (Last Name)

Midtgaard

3. Date

17-June-2016

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Ti anbefalinger til kræftpatienter, der skal understøtte bedre sundhed, livskvalitet og overlevelse

6. Manuscript Identifying Number (if you know it)

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Julie Midtgaard has nothing to disclose.

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1. Given Name (First Name)

Christoffer

2. Surname (Last Name)

Johansen

3. Date

17-June-2016

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

Julie Midtgaard

5. Manuscript Title

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Dr. Johansen has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Susan

2. Surname (Last Name)
Hovmand Lysdahl

3. Date
17-June-2016

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Julie Midtgaard

5. Manuscript Title

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Susan Hovmand Lysdahl has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Lise	2. Surname (Last Name) Bjerrum Thisted	3. Date 17-June-2016
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Julie Midtgaard
5. Manuscript Title Ti anbefalinger til kræftpatienter, der skal understøtte bedre sundhed, livskvalitet og overlevelse		
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Lise Bjerrum Thisted has nothing to disclose.

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Lena

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Ankersen

3. Date

17-June-2016

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Corresponding Author's Name

Julie Midtgaard

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

ICMJJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Karin	2. Surname (Last Name) Birtø	3. Date 17-June-2016
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Julie Midtgaard
5. Manuscript Title Ti anbefalinger til kræftpatienter, der skal understøtte bedre sundhed, livskvalitet og overlevelse		
6. Manuscript Identifying Number (if you know it)		

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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Karin Birtø has nothing to disclose.

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This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

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Section 1. Identifying Information

1. Given Name (First Name)
Anne

2. Surname (Last Name)
Tjønneland

3. Date
17-June-2016

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Julie Midtgaard

5. Manuscript Title

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1. Given Name (First Name)

Eva Maria

2. Surname (Last Name)

Soelberg Vadstrup

3. Date

17-June-2016

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

Julie Midtgaard

5. Manuscript Title

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