

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)

Anne Bank

2. Surname (Last Name)

Boisen

3. Date

24-November-2016

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name

Bjørn Bay

5. Manuscript Title

Genital actinomykose og bækkenabscesser hos 55-årig kvinde med 13 år gammel spiral

6. Manuscript Identifying Number (if you know it)

UFL-08-16-0583

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Dr. Boisen 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)

Eva

2. Surname (Last Name)

Ostenfeldt

3. Date

24-November-2016

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Bjørn Bay

5. Manuscript Title

Genital actinomykose og bækkenabscesser hos 55-årig kvinde med 13 år gammel spiral

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UFL-08-16-0583

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Section 1. Identifying Information

1. Given Name (First Name)

Lise Tornvig

2. Surname (Last Name)

Erikstrup

3. Date

05-November-2016

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Bjørn Bay

5. Manuscript Title

13 år med samme spiral: 55-årig kvinde med bækkenabscesser og genital actinomycosis

6. Manuscript Identifying Number (if you know it)

UFL-08-16-0583

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1. Given Name (First Name)
Bjørn

2. Surname (Last Name)
Bay

3. Date
06-October-2016

4. Are you the corresponding author? ☒ Yes ☐ No

5. Manuscript Title
Genital actinomykose og bækkenabscesser hos 55-årig kvinde med 13 år gammel spiral

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