

Instructions

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Winther Klinge



Section 1.	Identifying Inform	ation				
1. Given Name (First Name) Mette		2. Surname (Last Name) Winther Klinge		3. Date 10-March-201	7	
4. Are you the cor	responding author?	✓ Yes	No			
5. Manuscript Title Gastroparese Ov	e ersigt over udredning o	og behandling	g			
6. Manuscript Ider UFL-03-17-0187	ntifying Number (if you kn	ow it)				
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Section 2.	The Work Under Co	onsideratio	n for Publicatio	n		
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Section 4.	Intellectual Proper	tv Patent	s & Copyrights			
Do you have any	patents, whether plans			relevant to the work	? ☐ Yes 🗸	∕ No

Winther Klinge 2



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Winther Klinge 3



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Bech Pedersen 1



Section 1.	Identifying Inform	ation		
1. Given Name (First Jan	Name)	2. Surname (Last Name) Bech Pedersen	3. Date 10-March-2017	
4. Are you the corres	sponding author?	Yes ✓ No	Corresponding Author's Name Mette Winther Klinge	
5. Manuscript Title Gastroparese Over	sigt over udredning c	og behandling		
6. Manuscript Identi UFL-03-17-0187	fying Number (if you kn	ow it)		
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Section 3.	Relevant financial a	activities outside the	submitted work.	
Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to publication . Are there any relevant conflicts of interest? Yes Vo				
Section 4.	ntellectual Proper	ty Patents & Copyri	ghts	
Do you have any p	atents, whether planr	ned, pending or issued, b	roadly relevant to the work? Yes V No	

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Schelde 1



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1. Given Name (Fii Birgit	rst Name)	2. Surname (Last Name) Schelde	3. Date 10-March-2017
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5. Manuscript Title Gastroparese Ov	e ersigt over udredning	og behandling	
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Schelde 2



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Lund 1



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5. Manuscript Title Gastroparese Ov	e rersigt over udredning (og behandling	
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