

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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4. Intellectual Property.

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



| Section 1. Identifying Infor | mation | | |
|---|--------------------------------|---|--|
| 1. Given Name (First Name) Jacob | 2. Surname (Last Name) Juel | 3. Date 03-May-2017 | |
| 4. Are you the corresponding author? | Yes 🖌 No | Corresponding Author's Name Sine Holst-Albrechtsen | |
| 5. Manuscript Title Atypisk subkutan præsentation af bas | ocellulært carcinom | | |

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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✓ No

Are there any relevant conflicts of interest? Yes

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Section 4. Intellectual Property -- Patents & Copyrights

| Do you have any patents, whether planned, pending or issued, broadly relevant to the work? [| Yes | 🖌 No | |
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Dr. Juel has nothing to disclose.

Evaluation and Feedback

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| Section 1. | Identifying Inform | ation | | | |
|---|-----------------------------|-------------|----------------------------------|---|------------------------|
| 1. Given Name (Fin Anne | rst Name) | | ne (Last Name) gen Wagenblast | | 3. Date 09-May-2017 |
| 4. Are you the corresponding author? | | Yes | ✓ No | Corresponding Author's Name Sine Holst-Albrechtsen | |
| 5. Manuscript Title Atypisk subkutar | e n præsentation af baso | cellulært c | arcinom | | |
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🖌 No

| Are there any relevant conflicts of interest? | | Yes |
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