

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Moug

2. Surname (Last Name)

Al-Bakri

3. Date

4. Are you the corresponding author?

☒ Yes ☐ No

5. Manuscript Title

Akutte smerter og kraftnedsættelse i underekstremitet

6. Manuscript Identifying Number (if you know it)

67782

Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

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

Section 3. Relevant financial 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 ☒ No

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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Section 5. Relationships not covered above

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Dr. Al-Bakri has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Barbara

2. Surname (Last Name)

Michalska

3. Date

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name

Moug Al-Bakri

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Dr. Michalska has nothing to disclose.

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1. Given Name (First Name)

Anne

2. Surname (Last Name)

Molzen

3. Date

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Moug Al-Bakri

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Dr. Molzen has nothing to disclose.

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1. Given Name (First Name)

Dorte

2. Surname (Last Name)

Dalgaard

3. Date

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☐ Yes

☒ No

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Moug Al-Bakri

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Dr. Dalgaard has nothing to disclose.

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1. Given Name (First Name)

Niels

2. Surname (Last Name)

Andreasen

3. Date

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☐ Yes ☒ No

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Dr. Andreasen has nothing to disclose.

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