

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)
Nina

2. Surname (Last Name)
Hardgrib

3. Date
03-October-2017

4. Are you the corresponding author? Yes No

5. Manuscript Title
Poor correlation between Hip-Knee-Ankle angle and clinical intermalleolar distance corrected for leg length in children with genu valgum

6. Manuscript Identifying Number (if you know it)

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Dr. Hardgrib has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Martin

2. Surname (Last Name)
Gottliebse

3. Date
03-October-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Nina Hardgrib

5. Manuscript Title

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Dr. Gottliebsen has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Ole

2. Surname (Last Name)
Rahbek

3. Date
03-October-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Nina Hardgrib

5. Manuscript Title

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1. Given Name (First Name)
Michel

2. Surname (Last Name)
Hellfritzsch

3. Date
03-October-2017

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Yes No

Corresponding Author's Name
Nina Hardgrib

5. Manuscript Title

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1. Given Name (First Name)
Bjarne

2. Surname (Last Name)
Møller-Madsen

3. Date
03-October-2017

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Yes No

Corresponding Author's Name
Nina Hardgrib

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