

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

5. Relationships not covered above.

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Section 1. Identifying Information

1. Given Name (First Name) Steen	2. Surname (Last Name) Kofoed	3. Date 27-February-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Rune Strandby
5. Manuscript Title Assessment of biliary duct pathology by single operator cholangioscopy: A retrospective study		
6. Manuscript Identifying Number (if you know it)		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Dr. Kofoed has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Finnur	2. Surname (Last Name) Mellemgard	3. Date 27-February-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Rune Strandby
5. Manuscript Title Assessment of biliary duct pathology by single operator cholangioscopy: A retrospective study		
6. Manuscript Identifying Number (if you know it)		

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Dr. Mellemgard has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Rune

2. Surname (Last Name)
Strandby

3. Date
27-February-2018

4. Are you the corresponding author? Yes No

5. Manuscript Title
Assessment of biliary duct pathology by single operator cholangioscopy: A retrospective study

6. Manuscript Identifying Number (if you know it)

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Dr. Strandby has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Julie	2. Surname (Last Name) Blockmann	3. Date 27-February-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Rune Strandby
5. Manuscript Title Assessment of biliary duct pathology by single operator cholangioscopy: A retrospective study		
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1. Given Name (First Name) Lars Bo	2. Surname (Last Name) Svendsen	3. Date 27-February-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Rune Strandby
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Dr. Svendsen has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Michael	2. Surname (Last Name) Achiam	3. Date 27-February-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Rune Strandby
5. Manuscript Title Assessment of biliary duct pathology by single operator cholangioscopy: A retrospective study		
6. Manuscript Identifying Number (if you know it)		

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

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Dr. Achiam has nothing to disclose.

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