



ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Ann Dorthe Olsen

2. Surname (Last Name)
Zwisler

3. Date
22-April-2018

4. Are you the corresponding author? Yes No

5. Manuscript Title
Hjerterehabilitering og palliation – evidens, status og perspektiv

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

Section 3. Relevant financial activities outside the submitted work.

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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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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Zwisler has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)
Vicky

2. Surname (Last Name)
Joshi

3. Date
23-April-2018

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Ann-Dorthe Olsen Zwisler

5. Manuscript Title
Hjerterehabilitering og palliation – evidens, status og perspektiv

6. Manuscript Identifying Number (if you know it)

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Vicky Joshi has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Anne Merete

2. Surname (Last Name)
Soja

3. Date
07-May-2018

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Ann-Dorthe Zwisler

5. Manuscript Title
Hjerterehabilitering og palliation – evidens, status og perspektiv

6. Manuscript Identifying Number (if you know it)

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Dr. Soja has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Vibeke Brogaard

2. Surname (Last Name)
Hansen

3. Date

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Ann-Dorthe Olsen Zwisler

5. Manuscript Title

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Dr. Hansen has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Kim

2. Surname (Last Name)
Houind

3. Date
02-May-2018

4. Are you the corresponding author? Yes No

5. Manuscript Title
Hjerterehabilitering og palliation – evidens, status og perspektiv

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Dr. Houliind has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Britt

2. Surname (Last Name)
Borregaard

3. Date
19-April-2018

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Ann Dorthe Zwisler

5. Manuscript Title
Hjerterehabilitering og palliation – evidens, status og perspektiv

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Dr. Borregaard has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Mette Merlin

2. Surname (Last Name)
Husted

3. Date
05-January-2018

4. Are you the corresponding author? Yes No

5. Manuscript Title
Hjerterehabilitering og palliation – evidens, status og perspektiv

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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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property – Patents & Copyrights

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Dr. Husted has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Claus

2. Surname (Last Name)
Engstrup

3. Date
02-May-2018

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Ann-Dorthe Zwisler

5. Manuscript Title
Hjerterehabilitering og palliation – evidens, status og perspektiv

6. Manuscript Identifying Number (if you know it)

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Dr. Engstrup has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Amalie Martinus

2. Surname (Last Name)
Hauge

3. Date
08-May-2018

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Ann-Dorthe Zwisler

5. Manuscript Title
Hjerterehabilitering og palliation – evidens, status og perspektiv

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Amalie Martinus Hauge has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Grete

2. Surname (Last Name)
Brorholt

3. Date
26-April-2018

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Ann-Dorthe Zwisler

5. Manuscript Title
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Grete Brorholt has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Lars

2. Surname (Last Name)
Tang

3. Date
02-May-2018

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Ann-Dorthe Zwisler

5. Manuscript Title
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Dr. Tang has nothing to disclose.

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