



ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Jens

2. Surname (Last Name)

Karstoft

3. Date

24-September-2013

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Janus Mølgaard Christiansen

5. Manuscript Title

Junior doctors' diagnostic skills interpreting chest X-rays

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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nothing to disclose.

Evaluation and Feedback

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Oke	2. Surname (Last Name) Gerke	3. Date 24-September-2013
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Janus Mølgaard Christiansen
5. Manuscript Title Junior doctors' diagnostic skills interpreting chest X-rays		
6. Manuscript Identifying Number (if you know it)		

Section 2. The Work Under Consideration for Publication

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Dr. Gerke 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) Poul Erik	2. Surname (Last Name) Andersen	3. Date 25-September-2013
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Janus Mølgaard Christiansen
5. Manuscript Title Junior doctors diagnostic skills interpreting chest X-rays		
6. Manuscript Identifying Number (if you know it)		

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Section 1. Identifying Information

1. Given Name (First Name)

Janus Mølgaard

2. Surname (Last Name)

Christiansen

3. Date

15-November-2013

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Junior doctors diagnostic skills interpreting chest X-rays.

6. Manuscript Identifying Number (if you know it)

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