

#### Instructions

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Section 1.	Identifying Inforn	nation		
1. Given Name (Fi Ane	rst Name)	2. Surname (Last Name) Simony	)	3. Date 02-May-2014
4. Are you the cor	responding author?	✓ Yes No		
5. Manuscript Title Vertebroplasty fe		al compression fracture	s in patients with Multiple My	yeloma
6. Manuscript Ider	ntifying Number (if you ki	now it)		
Section 2.	The Work Under C	onsideration for Pub	olication	
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-	evant conflicts of inter	est? Yes 🖌 No	)	
Section 3.	Relevant financial	activities outside th	e submitted work.	
of compensation	n) with entities as descr	ibed in the instructions.	Use one line for each entity;	lationships (regardless of amount add as many lines as you need by <b>nonths prior to publication</b> .

Are there any relevant conflicts of interest?	Yes	🖌 No
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?	Yes	🗸 N	ю



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Dr. Simony has nothing to disclose.

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Section 1. Identifying Inform	ation		
1. Given Name (First Name) Emil Jesper	2. Surname (Last Name) Hansen		3. Date 02-May-2014
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Na Ane Simony	me
5. Manuscript Title Vertebroplasty for treatment of vertebr	al compression fractures	in patients with Multiple My	veloma
6. Manuscript Identifying Number (if you kr	now it)		
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Section 2. The Work Under Co	onsideration for Publ	ication	
Did you or your institution <b>at any time</b> rece any aspect of the submitted work (including statistical analysis, etc.)?			•
Are there any relevant conflicts of intere	est? Yes 🖌 No		
Section 3. Relevant financial	activities outside the	submitted work.	

## 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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Dr. Hansen has nothing to disclose.

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1. Given Name (First Name) Mikkel Østerheden	2. Surname (Last Name) Andersen		3. Date 02-May-2014
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Na Ane Simony	me
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Dr. Andersen has nothing to disclose.

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Section 1.	dentifying Informa	ation		
1. Given Name (First Marius	Name)	2. Surname (Last Name) Gaurilcikas		3. Date 02-May-2014
4. Are you the corres	ponding author?	Yes 🖌 No	Corresponding Author's Na Ane Simony	ame
5. Manuscript Title Vertebroplasty for	treatment of vertebra	l compression fractures i	n patients with Multiple My	veloma
6. Manuscript Identi	fying Number (if you kno	ow it)		
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	ant conflicts of interes	st? Yes 🖌 No		
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1. Given Name (First Name) Niels	2. Surname (Last Name) Abilgaard		3. Date 02-May-2014
4. Are you the corresponding author?	Corresponding Author's Na Ane Simony	me	
5. Manuscript Title Vertebroplasty for treatment of vertebra	al compression fractures i	n patients with Multiple My	veloma
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