

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name)

Jacob

2. Surname (Last Name)

Rosenberg

3. Date

28-May-2014

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Authorship issues in multicenter clinical trials: the importance of making an authorship contract

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Dr. Rosenberg has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)
Jakob

2. Surname (Last Name)
Burcharth

3. Date
28-May-2014

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Jacob Rosenberg

5. Manuscript Title
Authorship issues in multicenter clinical trials: the importance of making an authorship contract

6. Manuscript Identifying Number (if you know it)

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1. Given Name (First Name)

Hans-Christian

2. Surname (Last Name)

Pommergaard

3. Date

29-May-2014

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 Yes No

Corresponding Author's Name

Jacob Rosenberg

5. Manuscript Title

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Siri

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Vinther

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