

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Tina Heidi	2. Surname (Last Name) Pedersen	3. Date 10-September-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Thomas Løkkegaard
5. Manuscript Title Quality of oral anticoagulation treatment with warfarin in general practice using INR point of care testing		
6. Manuscript Identifying Number (if you know it)		

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Are there any relevant conflicts of interest?  Yes  No

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Dr. Pedersen has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name)  
Frans Boch

2. Surname (Last Name)  
Waldorff

3. Date  
20-August-2014

4. Are you the corresponding author?  Yes  No Corresponding Author's Name

5. Manuscript Title  
Quality of oral anticoagulation treatment with warfarin in general practice using INR point of care testing

6. Manuscript Identifying Number (if you know it)

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Volkert

2. Surname (Last Name)

Siersma

3. Date

21-August-2014

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

Thomas Løkkegaard

5. Manuscript Title

Quality of oral anticoagulation treatment with warfarin in general practice using INR point of care testing

6. Manuscript Identifying Number (if you know it)

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Dr. Siersma has nothing to disclose.

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1. Given Name (First Name)  
Thomas

2. Surname (Last Name)  
Løkkegaard

3. Date  
19-August-2014

4. Are you the corresponding author?  Yes  No

5. Manuscript Title  
Quality of oral anticoagulation treatment with warfarin in general practice using INR point of care testing

6. Manuscript Identifying Number (if you know it)

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1. Given Name (First Name) Bent	2. Surname (Last Name) Lind	3. Date 18-September-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Thomas Løkkegaard
5. Manuscript Title Quality of oral anticoagulation treatment in general practice using INR point of care testing		
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