

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)

Hanne Benedicte

2. Surname (Last Name)

Wielandt

3. Date

21 01 2015

4. Are you the corresponding author?

Yes No

5. Manuscript Title

THE OFFSPRING OF MOTHERS WITH GESTATIONAL DIABETES MELLITUS IN THEIR FIRST PREGNANCY

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Section 1. Identifying Information

1. Given Name (First Name)
Jesper
2. Surname (Last Name)
Fenger-Grøn
3. Date
21-February-2015
4. Are you the corresponding author? Yes No Corresponding Author's Name

5. Manuscript Title
The Offspring of Mothers with Gestational Diabetes Mellitus in their first Pregnancy
6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Dr. Fenger-Grøn has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Helena	2. Surname (Last Name) Schönemann-Rigel	3. Date 22-March-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Hanne Benedicte Wielandt
5. Manuscript Title THE OFFSPRING OF MOTHERS WITH GESTATIONAL DIABETES MELLITUS IN THEIR FIRST PREGNANCY		
6. Manuscript Identifying Number (if you know it) UFL-01-15-0067		

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1. Given Name (First Name)

Charlotte

2. Surname (Last Name)

Blunck

3. Date

22-March-2015

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

Hanne Benedicte Wielandt

5. Manuscript Title

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