

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)
Helle Westergren

2. Surname (Last Name)
Hendel

3. Date
30-June-2016

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Caroline Asirvatham Gjørup

5. Manuscript Title
Staging of cutaneous melanoma: Diagnostic value of chest X-ray

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Dr. Hendel has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Lisbet Rosenkrantz

2. Surname (Last Name)

Hölmich

3. Date

05-July-2016

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Caroline Asirvatham Gjørup

5. Manuscript Title

Staging of cutaneous melanoma: Diagnostic value of chest X-ray

6. Manuscript Identifying Number (if you know it)

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Dr. Hölmich has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Rita Kaae

2. Surname (Last Name)
Pilegaard

3. Date
05-July-2016

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Caroline Asirvatham Gjørup

5. Manuscript Title
Staging of cutaneous melanoma: Diagnostic value of chest X-ray

6. Manuscript Identifying Number (if you know it)

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1. Given Name (First Name)
Caroline Asirvatham

2. Surname (Last Name)
Gjørup

3. Date
05-July-2016

4. Are you the corresponding author? Yes No

5. Manuscript Title
Staging of cutaneous melanoma: Diagnostic value of chest X-ray

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1. Given Name (First Name)
Cecilie Balslev

2. Surname (Last Name)
Willert

3. Date
05-July-2016

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Caroline Asirvatham Gjørup

5. Manuscript Title
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