

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)
Peter Viktor

2. Surname (Last Name)
Glovinski

3. Date
02-June-2013

4. Are you the corresponding author? Yes No

5. Manuscript Title
Asymptomatic body packers should be treated conservatively

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Dr. Glovinski has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Morten Laksafoss	2. Surname (Last Name) Lauritsen	3. Date 12-June-2013
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Peter Viktor Glovinsky
5. Manuscript Title Asymptomatic body packers should be treated conservatively		
6. Manuscript Identifying Number (if you know it)		

Section 2. The Work Under Consideration for Publication

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Dr. Lauritsen has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Thue

2. Surname (Last Name)
Bisgaard

3. Date
06-June-2013

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Peter Glovinski

5. Manuscript Title
Asymptomatic body packers can be observed conservatively

6. Manuscript Identifying Number (if you know it)

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1. Given Name (First Name) Morten	2. Surname (Last Name) Bay-Nielsen	3. Date 11-June-2013
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Peter Viktor Glovinski
5. Manuscript Title Asymptomatic body packers should be treated conservatively		
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1. Given Name (First Name) Birgitte	2. Surname (Last Name) Brandstrup	3. Date 12-June-2013
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Peter Victor Glovinsky
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