

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in four parts.

Identifying information.

Enter your full name. If you are NOT the corresponding author please check the box "no" and a space to enter the name of the corresponding author in the space that appears. Provide the requested manuscript information. Double-check the manuscript number and enter it.

2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes". The complete the appropriate boxes to indicate the type of support and whether the payment went to you, or to your institution, or both.

3. Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

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4. Other relationships.

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Kromann-Andersen 1

Section 1.	Identifying Infor	mation		
1. Given Name (Fi Hans	rst Name)	2. Surname (Last Name) Kromann-Andersen		3. Effective Date (07-August-2008) 22-October-2012
4. Are you the corresponding author?		☐ Yes 🗸 No	Corresponding Author's Name Susanne Eiholm	
5. Manuscript Title Endoscopic brus		piliary duct system is still va	luable.	
6. Manuscript Ide	ntifying Number (if you	know it)		

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The Work Under Consideration for Publication							
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Relevant financial activities outside the submitted work

Kromann-Andersen 2

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Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work? No other relationships/conditions/circumstances that present a potential conflict of interest Yes, the following relationships/conditions/circumstances are present (explain below): At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.

Kromann-Andersen 3

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Thielsen 1

Section 1. Identifying Infor	mation	
Given Name (First Name) Peter	2. Surname (Last Name) Thielsen	3. Effective Date (07-August-2008 22-October-2012
4. Are you the corresponding author?		Corresponding Author's Name Susanne Eiholm
5. Manuscript Title Endoscopic brush cytology from the k	oiliary duct system is still v	aluable.
6. Manuscript Identifying Number (if you	know it)	

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	Show All Table Rows	SAVE	l				

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Eiholm 1



Section 1.	Identifying Infor	mation	
1. Given Name (Fii Susanne	rst Name)	2. Surname (Last Name) Eiholm	3. Effective Date (07-August-2008) 22-October-2012
4. Are you the cor	responding author?	✓ Yes No	
5. Manuscript Title Endoscopic brus		oiliary duct system is still valuable.	
6. Manuscript Ider	ntifying Number (if you l	know it)	

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