

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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#### 1. Identifying information.

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#### 4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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**Royalties:** Funds are coming in to you or your institution due to your patent

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Jens Ravn

2. Surname (Last Name)  
Eriksen

3. Date  
29-May-2013

4. Are you the corresponding author?  Yes  No

5. Manuscript Title  
Implementation of robot-assisted colorectal surgery – results of the first two years 223 procedures

6. Manuscript Identifying Number (if you know it)

### Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

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### Section 6. Disclosure Statement

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Dr. Eriksen has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) ismail	2. Surname (Last Name) Gögenur	3. Date 29-May-2013
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name _____
5. Manuscript Title Implementation of robot-assisted colorectal surgery – results of the first two years 223 procedures	_____	
6. Manuscript Identifying Number (if you know it)	_____	

### Section 2. The Work Under Consideration for Publication

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Dr. Gögenur has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name)  
Neel Maria

2. Surname (Last Name)  
Helvind

3. Date  
30-May-2013

4. Are you the corresponding author?  Yes  No

Corresponding Author's Name  
Jens Ravn Eriksen

5. Manuscript Title  
Implementation of robot-assisted colorectal surgery – results of the first two years 223 procedures

6. Manuscript Identifying Number (if you know it)

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Ms. Helvind 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) Thomas	2. Surname (Last Name) Harvald	3. Date 17-June-2013
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jens Ravn Eriksen
5. Manuscript Title Implementation of robot-assisted colorectal surgery – results of the first two years 223 procedures		
6. Manuscript Identifying Number (if you know it) _____		

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