

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### 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 six parts.

#### 1. Identifying information.

#### 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".

#### 3. Relevant financial activities outside the submitted work.

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#### 4. Intellectual Property.

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

#### 5. Relationships not covered above.

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**Other:** Anything not covered under the previous three boxes

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Dr. Malon reports grants from Faculty of Health and Medical Science, University of Copenhagen, during the conduct of the study; .

### 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)  
Dina

2. Surname (Last Name)  
Cortes

3. Date  
4. 10 2013

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Michelle Malon

5. Manuscript Title

Implementing video cases in clinical paediatric teaching and examination of medical students

6. Manuscript Identifying Number (if you know it)

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

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Dr. Cortes 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) Jette Led	2. Surname (Last Name) Sorensen	3. Date 04-October-2013
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Michelle Malon
5. Manuscript Title Implementing video cases in clinical paediatric teaching and examination of medical students		
6. Manuscript Identifying Number (if you know it)		

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

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Dr. Sorensen 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)  
Anja

2. Surname (Last Name)  
Poulsen

3. Date  
2013/10/03

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Michelle Malon

5. Manuscript Title  
Implementing video cases in clinical paediatric teaching and examination of medical students

6. Manuscript Identifying Number (if you know it)

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

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Dr. Poulsen has nothing to disclose.

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4. Are you the corresponding author?  Yes  No

5. Manuscript Title

6. Manuscript Identifying Number (if you know it)

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Dr. Nygaard has nothing to disclose.

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*Jonhath Nygaard*  
*7 Oct 2013*

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1. Given Name (First Name)  
Henrik Bindsbøl

2. Surname (Last Name)  
Mortensen

3. Date  
07-October-2013

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Michelle Malon

5. Manuscript Title  
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Are there any relevant conflicts of interest?  Yes  No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

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Dr. Mortensen has nothing to disclose.

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1. Given Name (First Name) Maria	2. Surname (Last Name) Bruusgaard Jensen	3. Date 07-October-2013
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Michelle Malon
5. Manuscript Title Implementing video cases in clinical paediatric teaching and examination of medical students		
6. Manuscript Identifying Number (if you know it)		

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Are there any relevant conflicts of interest?  Yes  No

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Jesper
2. Surname (Last Name)  
Andersen
3. Date  
08-October-2013
4. Are you the corresponding author?  Yes  No  
Corresponding Author's Name  
Michelle Malon
5. Manuscript Title  
Implementing video cases in clinical paediatric teaching and examination of medical students
6. Manuscript Identifying Number (if you know it)

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Jesper Andersen

Jesper Andersen  
ledende overlæge, ph.d., klinisk lektor  
Børneafdelingen  
Nordsjællands Hospital  
3400 Hillerød

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Dr. Greisen reports grants from Copenhagen University, during the conduct of the study; .

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