

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

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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)
Aysun

2. Surname (Last Name)
Avci

3. Date
21-June-2018

4. Are you the corresponding author? Yes No

5. Manuscript Title
Præoperativ organspecifik risikost stratificering

6. Manuscript Identifying Number (if you know it)

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Section 6. Disclosure Statement

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Dr. Avci has nothing to disclose.

Evaluation and Feedback

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ICMJJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

| | | |
|---|---|---|
| 1. Given Name (First Name) Jakob | 2. Surname (Last Name) Burcharth | 3. Date 21-June-2018 |
| 4. Are you the corresponding author? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Corresponding Author's Name Aysun Avci |
| 5. Manuscript Title Præoperativ organspecifik risikostратифisering | | |
| 6. Manuscript Identifying Number (if you know it) | | |

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Dr. Burcharth has nothing to disclose.

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Thomas

2. Surname (Last Name)

Lunen

3. Date

21-June-2018

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 Yes No

Corresponding Author's Name

Aysun Avci

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Præoperativ organspecifik risikostратифisering

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