

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)
Erika

2. Surname (Last Name)
Christensen

3. Date
05-July-2019

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Ninna Rysholt Poulsen

5. Manuscript Title
Registration of vital signs in ambulances: completeness increases with time

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Dr. Christensen has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Tim	2. Surname (Last Name) Lindskou	3. Date 05-July-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Ninna Rysholt Poulsen
5. Manuscript Title Registration of vital signs in ambulances: completeness increases with time		
6. Manuscript Identifying Number (if you know it)		

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Section 1. Identifying Information

1. Given Name (First Name)
Kenneth

2. Surname (Last Name)
Lübcke

3. Date
05-July-2019

4. Are you the corresponding author? Yes No

5. Manuscript Title
Registration of vital signs in ambulances: completeness increases with time

6. Manuscript Identifying Number (if you know it)

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Dr. Lübcke has nothing to disclose.

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1. Given Name (First Name)
Morten Breinholt

2. Surname (Last Name)
Søvsø

3. Date
05-July-2019

4. Are you the corresponding author? Yes No Corresponding Author's Name

5. Manuscript Title
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6. Manuscript Identifying Number (if you know it)

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Dr. Søvsvø has nothing to disclose.

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Torben

2. Surname (Last Name)
Kløjgaard

3. Date
05-July-2019

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5. Manuscript Title
Registration of vital signs in ambulances: completeness increases with time

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.)?

Are there any relevant conflicts of interest? Yes No

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Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were **present during the 36 months prior to publication**.

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

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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?

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N. R. Poulsen has nothing to disclose.

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