

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.

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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)
Niels

2. Surname (Last Name)
Uldbjerg

3. Date
25-August-2019

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Mohammed Rohi Khalil

5. Manuscript Title

The performance of routine dipstick urine-analysis for asymptomatic bacteriuria antepartum in identifying women with rectovaginal colonization with GBS at labor

6. Manuscript Identifying Number (if you know it)

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Dr. Uldbjerg 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)

Jens Kjølseth

2. Surname (Last Name)

Møller

3. Date

25-August-2019

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

Mohammed Rohi Khalil

5. Manuscript Title

The performance of routine dipstick urine-analysis for asymptomatic bacteriuria antepartum in identifying women with rectovaginal colonization with GBS at labor

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Are there any relevant conflicts of interest?

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Dr. Møller has nothing to disclose.

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1. Given Name (First Name)
Poul Bak

2. Surname (Last Name)
Thorsen

3. Date
25-August-2019

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Mohammed Rohi Khalil

5. Manuscript Title

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Section 1. Identifying Information

1. Given Name (First Name)
Mohammed Rohi

2. Surname (Last Name)
Khalil

3. Date
08-September-2019

4. Are you the corresponding author? Yes No

5. Manuscript Title

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