

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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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

Pending: The patent has been filed but not issued

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Licensed: The patent has been licensed to an entity, whether earning royalties or not

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) Christian	2. Surname (Last Name) Søborg	3. Date 27-January-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Anja Jørgensen
5. Manuscript Title Første tilfælde af Mykobakterium Chimera infektion relateret til åben thoraxkirurgi påvist i Danmark		
6. Manuscript Identifying Number (if you know it) UFL-11-19-0657		

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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Dr. Søborg 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) Aase Benggaard	2. Surname (Last Name) Andersen	3. Date 15-January-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Anja Jørgensen
5. Manuscript Title Første tilfælde af Mycobacterium chimaera infektion relateret til åben thoraxkirurgi påvist i Danmark		
6. Manuscript Identifying Number (if you know it)		

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Dr. Andersen 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)

Christina

2. Surname (Last Name)

Kruuse

3. Date

18-January-2020

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

5. Manuscript Title

Første tilfælde af Mycobacterium chimaera infektion relateret til åben thoraxkirurgi påvist i Danmark

6. Manuscript Identifying Number (if you know it)

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Dr. Kruuse 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)

Troels

2. Surname (Last Name)

Lillebaek

3. Date

15-January-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Anja Jørgensen

5. Manuscript Title

Første tilfælde af Mycobacterium chimaera infektion relateret til åben thoraxkirurgi påvist i Danmark

6. Manuscript Identifying Number (if you know it)

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Dr. Lillebaek has nothing to disclose.

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Section 1. Identifying Information

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Anja

2. Surname (Last Name)
Jørgensen

3. Date
15-January-2020

4. Are you the corresponding author? Yes No

5. Manuscript Title
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Kasper	2. Surname (Last Name) Iversen	3. Date 16-January-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Anja Jørgensen
5. Manuscript Title Første tilfælde af Mycobacterium chimaera infektion relateret til åben thoraxkirurgi påvist i Danmark		
6. Manuscript Identifying Number (if you know it)		

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Non-Financial Support: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

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1. Given Name (First Name)
Henning

2. Surname (Last Name)
Bundgaard

3. Date
16-January-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Anja Jørgensen

5. Manuscript Title
Første tilfælde af Mycobacterium chimaera infektion relateret til åben thoraxkirurgi påvist i Danmark

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1. Given Name (First Name) Emil	2. Surname (Last Name) Fosbøl	3. Date
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Anja Jørgensen
5. Manuscript Title Første tilfælde af Mycobacterium chimaera infektion relateret til åben thoraxkirurgi påvist i Danmark		
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