

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)

Louise

2. Surname (Last Name)

Milling

3. Date

24-April-2020

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

Søren Mikkelsen

5. Manuscript Title

Brug af mekanisk hjertemassage ved hjertestop udenfor hospital

6. Manuscript Identifying Number (if you know it)

03-20-0145

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Linde

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Søren Mikkelsen

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Dr. Linde has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Anne Craveiro

2. Surname (Last Name)

Brøchner

3. Date

23-April-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Søren Mikkelsen

5. Manuscript Title

Brug af mekanisk hjertemassage ved hjertestop udenfor hospital

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Jens Flensted

2. Surname (Last Name)

Lassen

3. Date

23-April-2020

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Yes

No

Corresponding Author's Name

Søren Mikkelsen

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