

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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#### 2. The work under consideration for publication.

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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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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Minna Onat

2. Surname (Last Name)

Hald

3. Date

03-June-2020

4. Are you the corresponding author?

Yes  No

5. Manuscript Title

Characterisation of patients with idiopathic olfactory dysfunction and plan for clinical follow up

6. Manuscript Identifying Number (if you know it)

### Section 2. The Work Under Consideration for Publication

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Dr. Hald 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) Alexander	2. Surname (Last Name) Fjaeldstad	3. Date 03-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Minna Onat Hald
5. Manuscript Title Characterisation of patients with idiopathic olfactory dysfunction and plan for clinical follow up		
6. Manuscript Identifying Number (if you know it)		

### Section 2. The Work Under Consideration for Publication

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Dr. Fjaeldstad has nothing to disclose.

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1. Given Name (First Name) Søren	2. Surname (Last Name) Kjær	3. Date 03-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Minna Onat Hald
5. Manuscript Title Characterisation of patients with idiopathic olfactory dysfunction and plan for clinical follow up		
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### Section 1. Identifying Information

1. Given Name (First Name)

Therese

2. Surname (Last Name)

Ovesen

3. Date

03-June-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

Minna Onat Hald

5. Manuscript Title

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