

## 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)  
Emilie

2. Surname (Last Name)  
Friis

3. Date  
15-January-2021

4. Are you the corresponding author?  Yes  No

5. Manuscript Title  
Nyrecancer diagnosticeret i graviditet behandlet med sectio og partiel nefrektomi som joint-venture

6. Manuscript Identifying Number (if you know it)

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Dr. Friis 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)  
Katrine

2. Surname (Last Name)  
Schou-Jensen

3. Date  
15-January-2021

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Emilie Friis

5. Manuscript Title  
Nyrecancer diagnosticeret i graviditet behandlet med sectio og partiel nefrektomi som joint-venture

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Dr. Schou-Jensen has nothing to disclose.

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1. Given Name (First Name)

Thomas

2. Surname (Last Name)

Bergholt

3. Date

15-January-2021

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

Emilie Friis

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1. Given Name (First Name) Per	2. Surname (Last Name) Bagi	3. Date 15-January-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Emilie Friis
5. Manuscript Title Nyrecancer diagnosticeret i graviditet behandlet med sectio og partiel nefrektomi som joint-venture		
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