

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.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Jens-Ove

2. Surname (Last Name)
Schmidt

3. Date
04-January-2021

4. Are you the corresponding author? Yes No

5. Manuscript Title
Posttrombotisk syndrom og endovaskulær behandling

6. Manuscript Identifying Number (if you know it)
UFL-12-20-0967

Section 2. The Work Under Consideration for Publication

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Section 6. Disclosure Statement

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Dr. Schmidt has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name) Marie Hvid	2. Surname (Last Name) Ipsen	3. Date 04-January-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jens-Ove Schmidt
5. Manuscript Title Posttrombotisk syndrom og endovaskulær behandling		
6. Manuscript Identifying Number (if you know it) UFL-12-20-0967		

Section 2. The Work Under Consideration for Publication

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1. Given Name (First Name) Nicolaj	2. Surname (Last Name) Eldrup	3. Date 04-January-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jens-Ove Schmidt
5. Manuscript Title Posttrombotisk syndrom og endovaskulær behandling		
6. Manuscript Identifying Number (if you know it) UFL-12-20-0967		

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1. Given Name (First Name) Niels	2. Surname (Last Name) Bækgaard	3. Date 04-January-2021
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jens-Ove Schmidt
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