

ICMJE DISCLOSURE FORM

Date: 9/18/2023

Your Name: Andreas Ronit

Manuscript Title: Første danske erfaring med fagterapi: behandling af pseudomonas-inficeret karprotese

Manuscript Number (if known): [Click or tap here to enter text.]

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

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6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
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13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

Please place an "X" next to the following statement to indicate your agreement:

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ICMJE DISCLOSURE FORM

Date: 9/18/2023

Your Name: Anders Porskrog

Manuscript Title: Første danske erfaring med fagterapi: behandling af pseudomonas-inficeret karprotese

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Date: 9/18/2023

Your Name: Sarah Djebara

Manuscript Title: Første danske erfaring med fagterapi: behandling af pseudomonas-inficeret karprotese

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Date: 9/18/2023

Your Name: Jean-Paul Pirnay

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Date: 9/18/2023

Your Name: Maia Merabishvili

Manuscript Title: Første danske erfaring med fagterapi: behandling af pseudomonas-inficeret karprotese

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Date: 9/18/2023

Your Name: [Toke S. Barfod]

Manuscript Title: [Første danske erfaring med fagterapi: behandling af pseudomonas-inficeret karprotese]

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Date: 9/18/2023

Your Name: Kim Thomsen

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Your Name: Christian T. Brandt

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