

# ICMJE DISCLOSURE FORM

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**Date:** 23. oktober 2025

**Your name:** Annemette Sloth Andersen

**Manuscript title:** Variation in Microbiological Test Requisitions among General Practices in the North Denmark

**Manuscript number** (if known):

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**Date:** 20. oktober 2025

**Your name:** David Fuglsang-Damgaard

**Manuscript title:** Variation in Microbiological Test Requisitions among General Practices in the North Denmark

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**Date:** 20. oktober 2025

**Your name:** Lizette P. Brandhøj-Gynthersen

**Manuscript title:** Variation in Microbiological Test Requisitions among General Practices in the North Denmark

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**Date:** 20. oktober 2025

**Your name:** Malene Plejdrup Hansen

**Manuscript title:** Variation in Microbiological Test Requisitions among General Practices in the North Denmark

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**Date:** 20. oktober 2025

**Your name:** Hans Linde Nielsen

**Manuscript title:** Variation in Microbiological Test Requisitions among General Practices in the North Denmark

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