ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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Colov

ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

| 1. Given Name (First Name) | Emilie Palmgren |
| 2. Surname (Last Name)     | Colov           |
| 3. Date                    | 21-November-2017|
| 4. Are you the corresponding author? | Yes ✔ No |
| 5. Manuscript Title        | Validation of a register-based algorithm for recurrence in rectal cancer |
| 6. Manuscript Identifying Number (if you know it) |  |

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

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?  
Are there any relevant conflicts of interest? Yes ✔ No

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Section 6. Disclosure Statement
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Dr. Colov has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Tina
2. Surname (Last Name)  Fransgaard
3. Date  21-November-2017
4. Are you the corresponding author?  No
   Corresponding Author’s Name  Emilie Palmgren Colov
5. Manuscript Title
   Validation of a register-based algorithm for recurrence in rectal cancer
6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Dr. Fransgaard has nothing to disclose.

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   Mads  
2. Surname (Last Name)  
   Klein  
3. Date  
   21-November-2017  
4. Are you the corresponding author?  
   ☑ No  
   Corresponding Author's Name  
   Emilie Palmgren Colov  
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<tr>
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<td>Gögenur</td>
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<tr>
<td><strong>Corresponding Author’s Name</strong></td>
<td>Emilie Palmgren Colov</td>
</tr>
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