ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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<tr>
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<th>3. Date</th>
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</thead>
<tbody>
<tr>
<td>Ida Sofie Kristina</td>
<td>Gardell</td>
<td>07-February-2015</td>
</tr>
</tbody>
</table>

4. Are you the corresponding author?  ✔ Yes  □ No

5. Manuscript Title
   Bone-anchore hearing aid: a retrospective study

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest?  □ Yes  ✔ No

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Dr. Gardell has nothing to disclose.

Evaluation and Feedback

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Section 1.
Identifying Information

1. Given Name (First Name) Kathrine
2. Surname (Last Name) Andresen
3. Date 07-February-2015
4. Are you the corresponding author? ☑ No

Corresponding Author’s Name
Ida Sofie Gardell

5. Manuscript Title
Bone-anchore hearing aid: a retrospective study

6. Manuscript Identifying Number (if you know it)

Section 2.
The Work Under Consideration for Publication

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Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☑ No
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Dr. Andresen has nothing to disclose.

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## Section 1. Identifying Information

1. Given Name (First Name)  
   - Christian Emil

2. Surname (Last Name)  
   - Faber

3. Date  
   - 07-February-2015

4. Are you the corresponding author?  
   - Yes [✓]  No

   Corresponding Author’s Name  
   - Ida Sofie Gardell

5. Manuscript Title  
   - Bone-anchore hearing aid: a retrospective study

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<tr>
<td>Jens</td>
<td>Højberg Wanscher</td>
<td>07-February-2015</td>
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   - [ ] Yes  
   - [x] No  

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Dr. Højberg Wanscher has nothing to disclose.

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