ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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**Section 1. Identifying Information**

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<table>
<thead>
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<tr>
<td>1. Given Name (First Name)</td>
<td>2. Surname (Last Name)</td>
<td>3. Date</td>
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<tr>
<td>Anja Rosenlund</td>
<td>Andersen</td>
<td>02-October-2015</td>
</tr>
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</table>

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

5. Manuscript Title
Risk of secondary esophageal and gastric cancer in patients treated for head and neck squamous cell carcinoma

6. Manuscript Identifying Number (if you know it)

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Dr. Andersen has nothing to disclose.

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Godballe
## Section 1. Identifying Information

1. **Given Name (First Name)**
   Christian

2. **Surname (Last Name)**
   Godballe

3. **Date**
   02-October-2015

4. **Are you the corresponding author?**
   - Yes
   - No ✔

   **Corresponding Author’s Name**
   Anja Rosenlund Andersen

5. **Manuscript Title**
   Risk of secondary esophageal and gastric cancer in patients treated for head and neck squamous cell carcinoma

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?
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- No ✔

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

## Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?
- Yes
- No ✔
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Dr. Godballe has nothing to disclose.

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**Section 1. Identifying Information**

1. **Given Name (First Name)**
   - Michael Bau

2. **Surname (Last Name)**
   - Mortensen

3. **Date**
   - 02-October-2015

4. **Are you the corresponding author?**
   - ✔ No

5. **Manuscript Title**
   - Risk of secondary esophageal and gastric cancer in patients treated for head and neck squamous cell carcinoma

6. **Manuscript Identifying Number (if you know it)**

**Corresponding Author’s Name**
- Anja Rosenlund Andersen

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Dr. Mortensen has nothing to disclose.

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**Section 1. Identifying Information**

1. Given Name (First Name)  
Ole Steen

2. Surname (Last Name)  
Bjerring

3. Date  
02-October-2015

4. Are you the corresponding author?  
Yes    ✔  No

Corresponding Author’s Name  
Anja Rosenlund Andersen

5. Manuscript Title  
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Dr. Bjerring has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
Sönke

2. Surname (Last Name)  
Detlefsen

3. Date  
04-September-2015

4. Are you the corresponding author?  
No

5. Manuscript Title  
Risk of secondary esophageal and gastric cancer in patients treated for head and neck squamous cell carcinoma

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