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.

1. Identifying information.

2. The work under consideration for publication.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Henrik Bjørnsgaard
2. Surname (Last Name)    Madsen
3. Date                   20-February-2014
4. Are you the corresponding author?  
   ✔ Yes  ❏ No
5. Manuscript Title
   Livstruende blødning ved nyopdaget nyresvigt og behandling med dabigatran
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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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. Madsen has nothing to disclose.

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**Section 1. Identifying Information**

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

2. **Surname (Last Name)**
   Lütken

3. **Date**
   21-February-2014

4. **Are you the corresponding author?**
   Yes ✔

5. **Manuscript Title**
   Livstruende blødning ved nyopdaget nyresvigt og behandling med dabigatran

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

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**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 ✔

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Are there any relevant conflicts of interest?  Yes ✔

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

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes ✔

Lütken
ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 5. Relationships not covered above**

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**Section 6. Disclosure Statement**

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Lütken has nothing to disclose.

**Evaluation and Feedback**

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Jonas Agerlund
2. Surname (Last Name) Povlsen
3. Date 21-February-2014

4. Are you the corresponding author? ☑ Yes

Corresponding Author’s Name
Henrik Bjørnsgaard Madsen

5. Manuscript Title
Livstruende blødning ved nyopdaget nyresvigt og behandling med dabigatran

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Løfgren
Section 1. Identifying Information

1. Given Name (First Name)  Bo
2. Surname (Last Name)  Løfgren
3. Date  21-February-2014

4. Are you the corresponding author?  [No]
   Corresponding Author's Name  Henrik Bjørnskov Madsen

5. Manuscript Title
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