ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
Øyvind

2. Surname (Last Name)  
Omland

3. Date  
28-September-2017

4. Are you the corresponding author?  
☐ Yes  ☑ No

5. Manuscript Title  
Arbejdssrelatert udfriedning af asbestose, eksponeringsvurdering.

6. Manuscript Identifying Number (If you know it)  
UFL-03-17-0266

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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Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to publication.

Are there any relevant conflicts of interest?  
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
☐ Yes  ☑ No
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Dr. Omland has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Harold William  

2. Surname (Last Name)  
   Meyer  

3. Date  
   29-September-2017  

4. Are you the corresponding author?  
   [ ] Yes  [ ] No  
   Corresponding Author’s Name  
   Øyvind Omland  

5. Manuscript Title  
   Arbejdsmarkedets erhvervs sikring af asbestose, eksponeringssvurdering.  

6. Manuscript Identifying Number (if you know it)  
   UFU-03-17-0266  

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Are there any relevant conflicts of interest?  
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If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

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<td>Jeg er konsulent for Arbejdsmarkedets Erhvervsikring, og behandler dermed arbejdsskadesager. Jeg mener dog ikke det giver en interessekonflikt, men nu er det deklareret.</td>
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   [ ] Yes  [ ] No
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Section 6. Disclosure Statement

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Dr. Meyer reports personal fees from Arbejdsmarkedets Erhvervssikring (Arbejdsskadestyrelsen), during the conduct of the study.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Helle

2. Surname (Last Name)  
   Lodberg Lauridsen

3. Date  
   05-October-2017

4. Are you the corresponding author?  
   ☑ No

   Corresponding Author's Name  
   Øyvind Omland

5. Manuscript Title  
   Arbejdssrelateret udfordring af asbestose, eksponeringsvurdering.

6. Manuscript Identifying Number (if you know it)  
   UFL-03-17-0266

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Dr. Lodberg Lauridsen has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Jakob Hjort
2. Surname (Last Name) Benløkke
3. Date 10-July-2017

4. Are you the corresponding author? ☐ Yes ☑ No
Corresponding Author's Name Øyvind Omlan

5. Manuscript Title Arbejdsrelateret udredning af asbestose, eksponeringsvurdering.

6. Manuscript Identifying Number (if you know it) UFL-03-17-0266

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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

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Dr. Banlakke has nothing to disclose.

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### Section 1. Identifying Information

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   Sherson
2. Surname (Last Name)  
   Sherson
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4. Are you the corresponding author?  
   ☑ No  
   Corresponding Author's Name  
   Øyvind Omland
5. Manuscript Title
6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest?  
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