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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<tbody>
<tr>
<td>Farnam Barati</td>
<td>Sedeh</td>
<td>07-August-2017</td>
</tr>
</tbody>
</table>

4. Are you the corresponding author? [ ] Yes [ ] No
   Corresponding Author’s Name: Yousif Subhi

5. Manuscript Title
   Projected prevalence of neovascular age-related macular degeneration and geographic atrophy in Denmark until year 2060

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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Dr. Sedeh has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)  
   Daniel Andrew Richard

2. Surname (Last Name)  
   Scott

3. Date  
   07-August-2017

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

   Corresponding Author’s Name  
   Yousif Subhi

5. Manuscript Title  
   Projected prevalence of neovascular age-related macular degeneration and geographic atrophy in Denmark until year 2060

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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Scott has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Yousif
2. Surname (Last Name) Subhi
3. Date 07-August-2017
4. Are you the corresponding author? ✔ Yes ☐ No
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Projected prevalence of neovascular age-related macular degeneration and geographic atrophy in Denmark until year 2060
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If yes, please fill out the appropriate information below.

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Dr. Subhi reports grants from Novartis, grants from Bayer, outside the submitted work.

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1. Given Name (First Name) Torben Lykke
2. Surname (Last Name) Sørensen
3. Date 07-August-2017
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Corresponding Author’s Name Yousif Subhi
5. Manuscript Title
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