ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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## Section 1. Identifying Information

<table>
<thead>
<tr>
<th>1. Given Name (First Name)</th>
<th>2. Surname (Last Name)</th>
<th>3. Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jakob</td>
<td>Kirkegård</td>
<td>24-June-2014</td>
</tr>
</tbody>
</table>

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

5. Manuscript Title
   Non-operative management of blunt splenic injuries in a pediatric population: A 12-year 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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## Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Kirkegård has nothing to disclose.

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Tue Højslev

2. Surname (Last Name)  
   Avlund

3. Date  
   24-June-2014

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

   Corresponding Author’s Name  
   Jakob Kirkegård

5. Manuscript Title  
   Non-operative management of blunt splenic injuries in a pediatric population: A 12-year retrospective study

6. Manuscript Identifying Number (if you know it)

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Dr. Avlund has nothing to disclose.

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Amanavicius
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Nerijus
2. Surname (Last Name)     Amanavicius
3. Date                     24-June-2014
4. Are you the corresponding author? [ ] Yes [x] No
   Corresponding Author’s Name
   Jakob Kirkegård
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Dr. Amanavicius has nothing to disclose.

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1. Given Name (First Name)  
   Frank Viborg

2. Surname (Last Name)  
   Mortensen

3. Date  
   24-June-2014

4. Are you the corresponding author?  
   [ ] Yes  ☑ No  
   Corresponding Author’s Name  
   Jakob Kirkegård

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   Peter  
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   Kissmeyer-Nielsen  
3. Date  
   24-June-2014  
4. Are you the corresponding author?  
   ✔ No  
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