ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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Section 1. Identifying Information

1. Given Name (First Name)  
   allan

2. Surname (Last Name)  
   kofoed-enevoldsen

3. Date  
   12-February-2015

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

Corresponding Author’s Name  
Raj Kumar Nayak

5. Manuscript Title  
suPAR as a biomarker for risk of readmission and mortality in the acute medical setting

6. Manuscript Identifying Number (if you know it)

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Yes ☐  No ☑

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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Section 6. Disclosure Statement

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Dr. kofoed-enevoldsen reports grants and non-financial support from ViroGates A/S, during the conduct of the study.

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1. Given Name (First Name)  
   Mikkel

2. Surname (Last Name)  
   Allingstrup

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   ✔ No  
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1. Given Name (First Name)  
   Raj Kumar

2. Surname (Last Name)  
   Nayak

3. Date

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   No

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Klaus

2. Surname (Last Name)  
Phanareth

3. Date  
02-April-2015

4. Are you the corresponding author?  
☐ Yes  ✔ No  
Corresponding Author’s Name  
Raj Kumar

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UFL-03-15-0227

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