ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 1. Identifying Information**

1. Given Name (First Name)  
   Marianne

2. Surname (Last Name)  
   Brehm Christensen

3. Date  
   02-June-2015

4. Are you the corresponding author?  
   ✔ Yes  
   No

5. Manuscript Title  
   Perinatal deaths at Hvidovre Hospital 2006-10; A case series study with a migrant perspective

6. Manuscript Identifying Number (if you know it)  
   UFL-06-15-0506

**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?  
   ✔ No

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

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
   ✔ No
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Dr. Brehm Christensen has nothing to disclose.

### Evaluation and Feedback

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<tbody>
<tr>
<td>Sarah</td>
<td>Fredsted Villadsen</td>
<td>30-June-2015</td>
</tr>
</tbody>
</table>

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

Corresponding Author’s Name
Marianne Brehm Christensen

5. Manuscript Title
Perinatal deaths at Hvidovre Hospital 2006-10; A case series study with a migrant perspective

6. Manuscript Identifying Number (if you know it)
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Dr. Fredsted Villadsen has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
Anne-Marie Nybo

2. Surname (Last Name)  
Andersen

3. Date  
30-June-2015

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

Corresponding Author’s Name  
Marianne Brehm Christensen

5. Manuscript Title  
Perinatal deaths at Hvidovre Hospital 2006-10; A case series study with a migrant perspective

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<tr>
<td>Tom</td>
<td>Weber</td>
<td>27-June-2015</td>
</tr>
</tbody>
</table>

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

| Corresponding Author’s Name | Marianne Brehm Christensen |

5. Manuscript Title  
Perinatal deaths at Hvidovre Hospital 2006-10; A case series study with a migrant perspective

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Dr. Weber has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name)  
   Charlotte

2. Surname (Last Name)  
   Wilken-Jensen

3. Date  
   27-June-2015

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   [ ] Yes  
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