ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Section 1. Identifying Information

1. **Given Name (First Name)**
   - Shiraz Ajmal

2. **Surname (Last Name)**
   - Qadar

3. **Date**
   - 14-August-2013

4. **Are you the corresponding author?**
   - Yes [✔]

5. **Manuscript Title**
   - Impact of a new emergency service in Denmark on care of acute appendicitis

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.)?

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Are there any relevant conflicts of interest? [☐ Yes] [✔ No]

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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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**Royalties:** Funds are coming in to you or your institution due to your patent
Section 1. Identifying Information

1. Given Name (First Name)  Yasuko
2. Surname (Last Name)       Maeda
3. Date                     12-August-2013
4. Are you the corresponding author?  ✔ Yes  No

5. Manuscript Title
Impact of a new emergency service in Denmark on care of acute appendicitis

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.)?

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<tr>
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<th>2. Surname (Last Name)</th>
<th>3. Date</th>
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<tbody>
<tr>
<td>Javed</td>
<td>Akram</td>
<td>13-August-2013</td>
</tr>
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</table>

4. Are you the corresponding author? 0 Yes 1 No

<table>
<thead>
<tr>
<th>Corresponding Author’s Name</th>
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<tr>
<td>Yasuko Maeda</td>
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<thead>
<tr>
<th>1. Given Name (First Name)</th>
<th>Mogens Rørbaek</th>
<th>2. Surname (Last Name)</th>
<th>Madsen</th>
<th>3. Date</th>
<th>15-August-2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>4. Are you the corresponding author?</td>
<td>✔ No</td>
<td>Corresponding Author’s Name</td>
<td>Yasuko Maeda</td>
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Dr. Madsen has nothing to disclose.

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