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.
3. Relevant financial activities outside the submitted work.
5. Relationships not covered above.

Definitions.

Entity: government agency, foundation, commercial sponsor, academic institution, etc.
Grant: A grant from an entity, generally [but not always] paid to your organization
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Other: Anything not covered under the previous three boxes
Pending: The patent has been filed but not issued
Issued: The patent has been issued by the agency
Licensed: The patent has been licensed to an entity, whether earning royalties or not
Royalties: Funds are coming in to you or your institution due to your patent

Cold
**Section 1. Identifying Information**

1. Given Name (First Name)  
   Frederik

2. Surname (Last Name)  
   Cold

3. Date  
   17-January-2020

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

   Corresponding Author’s Name  
   Lars Hestbjerg Hansen

5. Manuscript Title  
   Bakteriofagterapi - En mulig behandling af infektioner med multiresistente bakterier

6. Manuscript Identifying Number (if you know it)  
   UFL-11-19-0667

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**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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**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?  
- Yes  
- ☐ No

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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?  
- Yes  
- ☐ No
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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Cold has nothing to disclose.

Evaluation and Feedback

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4. **Intellectual Property.**

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)  
   Nikoline S.

2. Surname (Last Name)  
   Olsen

3. Date  
   19-January-2020

4. Are you the corresponding author?  
   Yes  ✔  No

   Corresponding Author’s Name  
   Lars Hestbjerg Hansen

5. Manuscript Title  
   Bakteriofagterapi - En mulig behandling af infektioner med multiresistente bakterier

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Are there any relevant conflicts of interest?  
   Yes  ✔  No

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   Yes  ✔  No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
   Yes  ✔  No
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Nikoline Olsen has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  Amaru Indigo Miranda San Martin
2. Surname (Last Name)    Djurhus
3. Date                   21-January-2020
4. Are you the corresponding author? Yes ☐ No ☑
   Corresponding Author’s Name Lars Hestbjerg Hansen
5. Manuscript Title
   Bakteriofagterapi - En mulig behandling af infektioner med multiresistente bakterier
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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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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Dr. Djurhus has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
Lars Hestbjerg  

2. Surname (Last Name)  
Hansen  

3. Date  
20-January-2020  

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

5. Manuscript Title  
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Prof. Hansen has nothing to disclose

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