

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Dorte

2. Surname (Last Name)  
Lildballe

3. Date  
10-May-2020

4. Are you the corresponding author?  Yes  No  
Corresponding Author's Name  
Maria Rasmussen

5. Manuscript Title  
Molekylærgenetisk udredning af patienter med mistanke om monogen arvelig nyresygdom

6. Manuscript Identifying Number (if you know it)  
UFL-02-20-0126

### 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

### Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest?  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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### Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

- Yes, the following relationships/conditions/circumstances are present (explain below):
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Dr. Lildballe has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Per

2. Surname (Last Name)  
Ivarsen

3. Date  
11-May-2020

4. Are you the corresponding author?  Yes  No

Corresponding Author's Name  
Maria Rasmussen

5. Manuscript Title  
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Maria

2. Surname (Last Name)  
Rasmussen

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10-May-2020

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