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.

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Juul Hansen
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Lars
2. Surname (Last Name)  Juul Hansen
3. Date  29-October-2019
4. Are you the corresponding author?  Yes  No
5. Manuscript Title
Validating the 7-item Eustachian Tube Dysfunction Questionnaire (ETDQ-7) in Danish
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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Dr. Juul Hansen has nothing to disclose.

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Glad
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Henrik
2. Surname (Last Name) Glad
3. Date 29-October-2019
4. Are you the corresponding author? ✔ No
   Corresponding Author's Name Lars Juul Hansen
5. Manuscript Title
   Validating the 7-item Eustachian Tube Dysfunction Questionnaire (ETDQ-7) in Danish
6. Manuscript Identifying Number (if you know it) ?

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Are there any relevant conflicts of interest? ✔ No

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Section 1. Identifying Information

1. Given Name (First Name)  
Andreas

2. Surname (Last Name)  
Jørkov

3. Date  
30-October-2019

4. Are you the corresponding author?  
☑️ No

Corresponding Author’s Name  
Lars Juul Hansen

5. Manuscript Title  
Validating the 7-item Eustachian Tube Dysfunction Questionnaire (ETDQ-7) in Danish

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Lundin
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<table>
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<tr>
<th>1. Given Name (First Name)</th>
<th>2. Surname (Last Name)</th>
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<tr>
<td>Kira</td>
<td>Lundin</td>
<td>30-October-2019</td>
</tr>
</tbody>
</table>

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

Corresponding Author’s Name

Lars Juul Hansen

5. Manuscript Title

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Dr. Lundin has nothing to disclose.

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Section 1. Identifying Information

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Malene

2. Surname (Last Name)  
Kirchmann

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30-October-2019

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Lars Juul Hansen

5. Manuscript Title  
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