

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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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Pia Iben

2. Surname (Last Name)
Pietersen

3. Date
25-March-2020

4. Are you the corresponding author? Yes No

5. Manuscript Title
Structured and evidence-based training of technical skills in respiratory medicine and thoracic surgery

6. Manuscript Identifying Number (if you know it)
?

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Section 6. Disclosure Statement

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Dr. Pietersen has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name) 2. Surname (Last Name) 3. Date
 Christian B. Laursen 24-March-2020

4. Are you the corresponding author? Yes No Corresponding Author's Name
Pia Iben Pietersen

5. Manuscript Title
 Structured and evidence-based training of technical skills in respiratory medicine and thoracic surgery

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
GE	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	For teaching at a ultrasound course

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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Dr. Laursen reports personal fees from GE, outside the submitted work; .

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1. Given Name (First Name)

Rene Horsleben

2. Surname (Last Name)

Petersen

3. Date

24-March-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Pia Iben Pietersen

5. Manuscript Title

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6. Manuscript Identifying Number (if you know it)

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1. Given Name (First Name) Lars	2. Surname (Last Name) Konge	3. Date 25-March-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Pia Iben Pietersen
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