

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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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)

Lisette

2. Surname (Last Name)

van Lieshout

3. Date

28-November-2018

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Meta Roestenberg

5. Manuscript Title

Katayama Syndrome without Schistosoma mansoni Eggs

6. Manuscript Identifying Number (if you know it)

L18-0438

Section 2. The Work Under Consideration for Publication

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Dr. van Lieshout has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Marie-Astrid	2. Surname (Last Name) Hoogerwerf	3. Date 28-November-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Meta Roestenberg
5. Manuscript Title Katayama Syndrome without Schistosoma mansoni Eggs		
6. Manuscript Identifying Number (if you know it) L18-0438		

Section 2. The Work Under Consideration for Publication

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Dr. Hoogerwerf has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Marijke C.C.	2. Surname (Last Name) Langenberg	3. Date 28-November-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Meta Roestenberg
5. Manuscript Title Katayama Syndrome without Schistosoma mansoni Eggs		
6. Manuscript Identifying Number (if you know it) L18-0438		

Section 2. The Work Under Consideration for Publication

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Dr. Langenberg has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Jacqueline J.	2. Surname (Last Name) Janse	3. Date 28-November-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name M. Roestenberg
5. Manuscript Title Katayama Syndrome without Schistosoma mansoni Eggs		
6. Manuscript Identifying Number (if you know it) L18-0438		

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Section 1. Identifying Information

1. Given Name (First Name)
Meta

2. Surname (Last Name)
Roestenberg

3. Date
27-November-2018

4. Are you the corresponding author? Yes No

5. Manuscript Title
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6. Manuscript Identifying Number (if you know it)
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Section 1. Identifying Information

1. Given Name (First Name) Paul	2. Surname (Last Name) Corstjens	3. Date 28-November-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Meta Roestenberg
5. Manuscript Title Katayama Syndrome without Schistosoma mansoni Eggs		
6. Manuscript Identifying Number (if you know it) L18-0438		

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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Dr. Corstjens has nothing to disclose.

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