

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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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)
Clemens

2. Surname (Last Name)
Weinberg

3. Date
13-February-2014

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Dominic Wichmann

5. Manuscript Title

Virtual autopsy with multi-phase postmortem CT angiography vs. traditional medical autopsy to investigate sudden deaths of hospitalized patients.

6. Manuscript Identifying Number (if you know it)

M13-2211

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Mr. Weinberg 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)

Silke

2. Surname (Last Name)

Grabherr

3. Date

22-February-2014

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

Dominic Wichmann

5. Manuscript Title

Virtual autopsy with multi-phase postmortem CT angiography vs. traditional medical autopsy to investigate sudden deaths of hospitalized patients

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M13-2211

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1. Dr. Grabherr has a personal research grant from the "Fondation Leenards" Lausanne, Switzerland.
2. The tubing set and contrast agent used for post-mortem Angiography of the cases included in this study were partially supported by FUMEDICA AG, Muri, Switzerland.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Wilhelm	2. Surname (Last Name) Hoepker	3. Date 27-February-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Wichmann
5. Manuscript Title Virtual autopsy with multi-phase postmortem CT angiography vs. traditional medical autopsy to investigate sudden deaths of hospitalized patients		
6. Manuscript Identifying Number (if you know it) M13-2211		

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Prof. Dr. Hoepker 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) Stefan	2. Surname (Last Name) Kluge	3. Date 10-February-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Dominic Wichmann
5. Manuscript Title Virtual autopsy with multi-phase postmortem CT angiography vs. traditional medical autopsy to investigate sudden deaths of hospitalized patients		
6. Manuscript Identifying Number (if you know it)		

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Dr. Kluge has nothing to disclose.

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Dominic

2. Surname (Last Name)
Wichmann

3. Date
10-February-2019

4. Are you the corresponding author? Yes No

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Section 1. Identifying Information

1. Given Name (First Name) Klaus	2. Surname (Last Name) Püschel	3. Date 18-February-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Dominic Wichmann
5. Manuscript Title Virtual autopsy with multi-phase postmortem CT angiography...		
6. Manuscript Identifying Number (if you know it) M13-2211		

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Are there any relevant conflicts of interest? Yes No

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1. Identifying information.

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This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

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For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

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1. Given Name (First Name)
Heinemann

2. Surname (Last Name)
Axel

3. Date
20-February-2014

4. Are you the corresponding author? Yes No
Corresponding Author's Name
Dominic Wichmann MD

5. Manuscript Title
Virtual autopsy with multi-phase postmortem CT angiography vs. traditional medical autopsy to investigate unexpected deaths of hospitalized patients

6. Manuscript Identifying Number (if you know it)
M13-2211

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Fumedica, Muri, Switzerland	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A part of the consumables used for angiography results has been granted by the company which is the manufacturer of the perfusion machine used for post mortem angiography

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Are there any relevant conflicts of interest? Yes No

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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Axel Heinemann reports grants from Fumedica, Muri, Switzerland, during the conduct of the study; .

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Section 1. Identifying Information

1. Given Name (First Name)
Hermann

2. Surname (Last Name)
Vogel

3. Date
18-February-2014

4. Are you the corresponding author? Yes No

5. Manuscript Title
Virtual autopsy with multi-phase postmortem CT angiography vs. traditional medical autopsy to investigate sudden deaths of hospitalized patients.

6. Manuscript Identifying Number (if you know it)
M13-2211

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Dr. Vogel has nothing to disclose.

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