

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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2. The work under consideration for publication.

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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)

Jón

2. Surname (Last Name)

Karlsson

3. Date

03-December-2014

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name

Kajsa Rennerfelt

5. Manuscript Title

Changes in muscle oxygen saturation have low sensitivity in diagnosing chronic anterior compartment syndrome of the leg

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Dr. Karlsson has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)
Kajsa

2. Surname (Last Name)
Rennerfelt

3. Date
03-December-2014

4. Are you the corresponding author? ☒ Yes ☐ No

5. Manuscript Title
Changes in muscle oxygen saturation have low sensitivity in diagnosing chronic anterior compartment syndrome of the leg

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Dr. Rennerfelt has nothing to disclose.

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Jorma

2. Surname (Last Name)

Styf

3. Date

03-December-2014

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☐ Yes

☒ No

Corresponding Author's Name

Kajsa Rennerfelt

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Qiuxia

2. Surname (Last Name)
Zhang

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03-December-2014

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☐ Yes ☒ No

Corresponding Author's Name
Kajsa Rennerfelt

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