

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Peter

2. Surname (Last Name)
Olupot-Olupot

3. Date
07-February-2017

4. Are you the corresponding author? Yes No

5. Manuscript Title
Multidrug resistant tuberculosis (MDR-TB) in emerging economies in Sub-Saharan Africa: clinicians' public health concerns

6. Manuscript Identifying Number (if you know it)

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Section 6. Disclosure Statement

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Dr. Olupot-Olupot has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)
Damalie

2. Surname (Last Name)
Namuyodi

3. Date
07-February-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Peter Olupot-Olupot

5. Manuscript Title

Multidrug resistant tuberculosis (MDR-TB) in emerging economies in Sub-Saharan Africa: clinicians' public health concerns

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Section 1. Identifying Information

1. Given Name (First Name) John Stephen Olwenyi	2. Surname (Last Name) Obbo	3. Date 07-February-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Peter Olupot-Olupot
5. Manuscript Title Multidrug resistant tuberculosis (MDR-TB) in emerging economies in Sub-Saharan Africa: clinicians' public health concerns		
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1. Given Name (First Name) Jeanette	2. Surname (Last Name) Meadway	3. Date 07-February-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Peter Olupot-Olupot
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