

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Noreen	2. Surname (Last Name) van der Linden	3. Date 01-April-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Steven J. R. Meex
5. Manuscript Title Better, higher, lower, faster: increasingly rapid clinical decision making using high-sensitivity cardiac troponin assays		
6. Manuscript Identifying Number (if you know it) JLPM-17-28		

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Dr. van der Linden has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Alexander	2. Surname (Last Name) Streng	3. Date 01-April-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Steven J. R. Meex
5. Manuscript Title Better, higher, lower, faster: increasingly rapid clinical decision making using high-sensitivity cardiac troponin assays		
6. Manuscript Identifying Number (if you know it) JLPM-17-28		

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Dr. Streng has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Will

2. Surname (Last Name)
Wodzig

3. Date
01-April-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Steven J. R. Meex

5. Manuscript Title

Better, higher, lower, faster: increasingly rapid clinical decision making using high-sensitivity cardiac troponin assays

6. Manuscript Identifying Number (if you know it)

JLPM-17-28

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2. Surname (Last Name)
Meex

3. Date
01-April-2017

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