## **ICMJE DISCLOSURE FORM**

Date: 09-11-2021 Your Name: Lisanne Beugelink Manuscript Title: "Hypercalciëmie ná hyperkaliëmie" Manuscript number (if known): D6274

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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3	Royalties or licenses	X None	

4	Consulting fees	X None
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	speakers bureaus, manuscript writing or educational events	
6	Payment for expert testimony	X None
7	Support for attending meetings and/or travel	X None
8	Patents planned, issued or pending	X None
9	Participation on a Data Safety Monitoring Board or	X None
	Advisory Board	
10	Leadership or fiduciary role in other board, society,	X None
	committee or advocacy	
11	group, paid or unpaid Stock or stock options	X None
12	Receipt of equipment,	X None
14	materials, drugs, medical	
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13	Other financial or non- financial interests	X None

## Please place an "X" next to the following statement to indicate your agreement:

X I certify that I have answered every question and have not altered the wording of any of the questions on this form.