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Date: 30. april 2025

Your name: Tina Toft Kristensen

Manuscript title: Kirurgiske parathyroideasygdomme

Manuscript number (if known):

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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		Name all entities with whom you have this relationship or indicate none (add rows as needed)	**Specifications/Comments (e.g., if payments were made to you or to your institution)**
Time frame: Since the initial planning of the work			
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) **No time limit for this item.**	☒ **None**	

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Time frame: past 36 months

2	Grants or contracts from any entity (if not indicated in item #1 above).	☒ **None**	

3	Royalties or licenses	☒ **None**	

4	Consulting fees	☒ **None**	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	☒ **None**	

6	Payment for expert testimony	☒ **None**	

7	Support for attending meetings and/or travel	☒ **None**	

8	Patents planned, issued or pending	☒ **None**	

9	Participation on a Data Safety Monitoring Board or Advisory Board	☒ **None**	

10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	☐ **None**	
		I am a board member of the Danish Thyroid Association	

11	Stock or stock options	☒ **None**	

I	Receipt of equipment, materials, drugs, medical writing, gifts or other services	☒ **None**	

13	Other financial or non-financial interests	☒ **None**	

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Date: 28. april 2025

Your name: Bo Abrahamsen

Manuscript title: Kirugiske parathyroideasygdomme

Manuscript number (if known):

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2	Grants or contracts from any entity (if not indicated in item #1 above).	☐ **None**	
		UCB	Institutional research contract (ended 2023)

3	Royalties or licenses	☐ **None**	

4	Consulting fees	☒ **None**	
		Kyowa-Kirin	Development of research protocol
		EffXr Switzerland	Expert advice

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	☒ **None**	

6	Payment for expert testimony	☒ **None**	

7	Support for attending meetings and/or travel	☒ **None**	

8	Patents planned, issued or pending	☒ **None**	

9	Participation on a Data Safety Monitoring Board or Advisory Board	☒ **None**	

10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	☐ **None**	
		European Calcified Tissue Soc	Board member

11	Stock or stock options	☒ **None**	

12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	☒ **None**	

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Date: 28. april 2025

Your name: Lars Rolighed

Manuscript title: Kirugiske parathyroideasygdomme

Manuscript number (if known):

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Date: 28. april 2025

Your name: Waldemar Trolle

Manuscript title: Kirugiske parathyroideasygdomme

Manuscript number (if known):

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Date: 28. april 2025

Your name: Lars Rejnmark

Manuscript title: Kirugiske parathyroideasygdomme

Manuscript number (if known):

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Date: 28. april 2025

Your name: Tanja Sikjær

Manuscript title: Kirugiske parathyroideasygdomme

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