

INSTRUCTIONS:

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form has five parts.

1. Identifying information.

Each author should submit a separate form. Provide complete information and double-check the manuscript number. If you are NOT the corresponding author please insert his or her name.

2. The work under consideration for publication.

Please provide information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The idea is to provide for the reader information about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. If you check the "No" box it means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds to pay you. If you or your institution did receive funds from a third party to support the work, check "Yes" along with the appropriate boxes to indicate the type of support and whether you or your institution received it.

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4. Financial relationships involving your spouse or partner or your children (under 18 years of age).

If monies from the types of relationships listed in Section 3 were paid to your spouse or partner or dependent children, please list the type of activity and source of the money.

5. Nonfinancial associations.

Please report any personal, professional, political, institutional, religious, or other associations that a reasonable reader would want to know about in relation to the submitted work.



Poulsen

Effective Date: 24-June-2011

Surname:

Section 1. Identifying Information.

Marie Louise

Given Name:

(or first)		(01 13	ast)		1 07 4	. 2000
Are you the correspond	ing auth	or? ⊠ Yes	□ No		Format example: 07-Augu	1st-2008
Manuscript Title: Forskni	ingsinter	esse og -aktiv	ritet blandt lægest	uderende ved Københavr	ns Universitet	
Manuscript Identifying N	lumber	(if you knov	v it):			
Section 2. Information a					-	1
limited to grants, data monit	•			, ,	the submitted work (including alysis, etc)?	ig but not
⊠ No						
Yes, specify nature of	of comp	ensation				
Section 3. Information a						
compensation) with any ent as you need. Use the comme know about the compensati	ities that tents col on. Rep all outsid xample,	have an inter- umn to indica- ort relationsh- e the 36-mon- long-term fin	rest related to the ate any additional nips that were presenth window that relationship	submitted work. Use one information that you thir sent during the 36 month eaders may want to know ps that are now ended).	ationships (regardless of amore line for each entity; add as rak a reader or editor would we sprior to submission. In add about and could reasonably the an extra row.	nany lines ant to ition please
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your institution	Entity	Comments	
Board membership	\boxtimes					Del×
						Add +
Consultancy	\boxtimes					Del×
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Employment	\boxtimes					Del ×
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Expert testimony	\boxtimes					Del ×
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Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your institution	Entity	Comments	
Gifts	\boxtimes					Del ×
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Grants/grants pending	\boxtimes					Del ×
						Add +
Honoraria	\boxtimes					Del ×
		Γ			1	Add +
Payment for manuscript preparation	\boxtimes					Del ×
r · r					1	Add +
Patents (planned, pending or issued)	\boxtimes					Del ×
					1	Add +
Royalties	\boxtimes					Del ×
						Add +
Payment for development of educational presentations including service on speakers' bureaus	\boxtimes					Del×
						Add +
Stock/stock options	\boxtimes					Del ×
						Add +
Travel/accommodations expenses covered or reimbursed	\boxtimes					Del ×
						Add +
Other (err on the side of full disclosure)	\boxtimes					Del×
						Add +



Section 4. Information about financial relationships involving your spouse or partner or your children (under 18 years of age).

Do your children or your spouse or partner have financial relationships with entities that have an interest in the submitted work?	e content of the
No other relationships/conditions/circumstances that present potential conflict of interest	
Yes, the following relationships/conditions/circumstances are present (explain below):	
Section 5. Information about relevant nonfinancial associations.	
Do you have any relevant nonfinancial associations or interests (personal, professional, political, institutional, rethat a reasonable reader would want to know about in relation to the submitted work?	religious, or other)
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Wareham

Effective Date: 24-June-2011

Surname:

Section 1. Identifying Information.

Neval Ete

Given Name:

(or first)	evai Ete	(or la	ast) warenam			
Are you the co	orresponding auth	or? X Yes	□ No		Format example: 07-Augu	ıst-2008
Manuscript Title	Forskningsinter	esse og -aktiv	ritet blandt læges	tuderende ved Københa	avns Universitet	
Manuscript Iden	ntifying Number	(if you know	v it):			
Section 2. Inform	mation about t	the suppor	t of the work	under consideration	on for publication.	
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compensation) wit as you need. Use the know about the co- disclose relationship you for not disclose	th any entities that the comments col empensation. Rep ips that fall outsid sing (for example,	thave an inter- umn to indica- port relationships the 36-mon long-term fin	rest related to the ate any additional hips that were preath window that a nancial relationsh	e submitted work. Use of l information that you the esent during the 36 more		nany lines ant to tion please
Type of Relation	- NO	Money Paid to You	Money to Your institution	Entity	Comments	
Board membership						Del ×
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Consultancy						Del ×
	-					Add +
Employment						Del ×
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Expert testimony	\boxtimes					Del ×
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						Add +
Grants/grants pending	\boxtimes					Del ×
						Add +
Honoraria	\boxtimes					Del ×
						Add +
Payment for manuscript preparation	\boxtimes					Del ×
p-0p-00-00-00-0		<u> </u>				Add +
Patents (planned, pending or issued)	\boxtimes					Del ×
			1			Add +
Royalties	\boxtimes					Del ×
						Add +
Payment for development of educational presentations including service on speakers' bureaus						Del×
						Add +
Stock/stock options	\boxtimes					Del ×
						Add +
Travel/accommodations expenses covered or reimbursed	\boxtimes					Del ×
						Add +
Other (err on the side of full disclosure)	\boxtimes					Del ×
						Add +



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Yes, the following relationships/conditions/circumstances are present (explain below):	
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Do you have any relevant nonfinancial associations or interests (personal, professional, political, institutional, that a reasonable reader would want to know about in relation to the submitted work?	religious, or other)
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	Save Form



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Identifying information.

Enter your full name. If you are NOT the corresponding author please check the box "no" and a space to enter the name of the corresponding author in the space that appears. Provide the requested manuscript information. Double-check the manuscript number and enter it.

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3. Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

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4. Other relationships.

Use this section to report other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work.



Section 1.	Identifying Infor	mation		
1. Given Name (Fi	irst Name)	2. Surname (Last Name) Ovesen		3. Effective Date (07-August-2008) 29-November-2011
4. Are you the corresponding author? Yes Vo		Corresponding Author's Name Marie Louise Mølgaard Poulsen		
5. Manuscript Titl Forskningsinter		dt lægestuderende ved Kø	benhavns Universitet	
6. Manuscript Ide	ntifying Number (if you	know it)		

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc...)?

Complete each row by checking "No" or providing the requested information. If you have more than one relationship click the "Add" button to add a row. Excess rows can be removed by clicking the "X" button.

The Work Under Consideration (for Pub	lication				
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant	✓					×
						ADD
2. Consulting fee or honorarium	✓					×
						ADD
Support for travel to meetings for the study or other purposes	✓					×
						ADD
 Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like 	✓					×
						ADD
Payment for writing or reviewing the manuscript	✓					×
						ADD
Provision of writing assistance, medicines, equipment, or administrative support	✓					×



The Work Under Consideration for Publication										
т	ype	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**				
							ADD			
7. Other		✓					×			
							ADD			

Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to submission.

Complete each row by checking "No" or providing the requested information. If you have more than one relationship click the "Add" button to add a row. Excess rows can be removed by clicking the "X" button.

Relevant financial activities out	side the	submit	ted work			
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
1. Board membership	✓					×
						ADD
2. Consultancy	√					×
						ADD
3. Employment	✓					X
						ADD
4. Expert testimony	✓					X
						ADD
5. Grants/grants pending	✓					X
						ADD
Payment for lectures including service on speakers bureaus	✓					×
						ADD
Payment for manuscript preparation	✓					×

^{*} This means money that your institution received for your efforts on this study.

^{**} Use this section to provide any needed explanation.



Relevant financial activities outside the submitted work									
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments				
						ADD			
Patents (planned, pending or issued)	√					×			
						ADD			
9. Royalties	✓					×			
						ADD			
10. Payment for development of educational presentations	✓					×			
						ADD			
11. Stock/stock options	✓					×			
						ADD			
12. Travel/accommodations/ meeting expenses unrelated to activities listed**	√					×			
						ADD			
13. Other (err on the side of full disclosure)	✓					×			
* This means money that your institution received for your efforts. ** For example, if you report a consultancy above there is no need to report travel related to that consultancy on this line.									
Section 4. Other relationsh	nips								

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

 \checkmark No other relationships/conditions/circumstances that present a potential conflict of interest

Yes, the following relationships/conditions/circumstances are present (explain below):

At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

Hide All Table Rows Checked 'No'

SAVE



Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.



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Madsen

Effective Date: 24-June-2011

Surname:

Section 1. Identifying Information.

Maiken Merete

Given Name:

(or first)	iaiken Merete		(or la	ist)			
Are you the c	orresponding	g autho	r? 🛛 Yes	□ No		Format example: 07-Augu	ıst-2008
Manuscript Title	e: Forskning	sintere	sse og -aktiv	itet blandt læge	studerende ved Københa	avns Universitet	
Manuscript Iden	ntifying Nur	nber (i	if you know	7 it):			
Section 2. Infor	mation abo	out th	e support	t of the work	under considerati	on for publication.	
					rt in kind for any aspect t preparation, statistical	of the submitted work (including analysis, etc)?	ng but not
⊠ No		O	,			, ,	
_	fy nature of o	comper	nsation				
Section 3. Infor	mation abo	out re	levant fin	ancial relati	onships outside th	e submitted work.	
					-	relationships (regardless of amo	ount of
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•				•	-	hink a reader or editor would wanths prior to submission. In addi	
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If you have more	than one rela	ationsh	ip, click "Ac	ld +" to add a r	ow. Click "Del ×" to de	elete an extra row.	
Type of Relation	- 1	No	Money Paid to	Money to Your	Entity	Comments	
(in alphabetica	l order)		You	institution			
Board membership							Del ×
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Consultancy		\boxtimes					Del ×
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Employment							Del ×
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Expert testimony							Del ×
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Grants/grants pending	\boxtimes					Del ×
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Honoraria						Del ×
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Payment for manuscript preparation	\boxtimes					Del×
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Patents (planned, pending or issued)	\boxtimes					Del ×
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Royalties	\boxtimes					Del ×
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Payment for development of educational presentations including service on speakers' bureaus	\boxtimes					Del×
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Stock/stock options	\boxtimes					Del ×
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Travel/accommodations expenses covered or reimbursed	\boxtimes					Del ×
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Other (err on the side of full disclosure)	\boxtimes					Del ×
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Boardmember of Panums UngdomsForsker Forening (PUFF).	
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Section 1. Identifying Information.

Given Name: (or first)	Julie Bjerglu	nd	Surn: (or la	I And	ersen		Effective Date:	24-June-2011	
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Section 4. Information about financial relationships involving your spouse or partner or your children (under 18 years of age).

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Do your children or your spouse or partner have financial relationships with entities that have an interest in the submitted work?	ne content of the
No other relationships/conditions/circumstances that present potential conflict of interest	
Yes, the following relationships/conditions/circumstances are present (explain below):	
Section 5. Information about relevant nonfinancial associations.	
Do you have any relevant nonfinancial associations or interests (personal, professional, political, institutional, that a reasonable reader would want to know about in relation to the submitted work?	religious, or other)
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INSTRUCTIONS:

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form has five parts.

1. Identifying information.

Each author should submit a separate form. Provide complete information and double-check the manuscript number. If you are NOT the corresponding author please insert his or her name.

2. The work under consideration for publication.

Please provide information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The idea is to provide for the reader information about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. If you check the "No" box it means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds to pay you. If you or your institution did receive funds from a third party to support the work, check "Yes" along with the appropriate boxes to indicate the type of support and whether you or your institution received it.

3. Relevant financial activities outside the submitted work.

Please report all sources of revenue relevant to the submitted work that accrued either directly to you or were paid to your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. If there is any question, it is usually better to disclose a relationship than not to do so. Please note that your interactions with the work's sponsor outside the submitted work should be listed here. For each category list each entity on a separate line. Use as many lines as necessary to provide complete information. In addition, please disclose relationships that fall outside the 36-month window that readers may want to know about and could reasonably criticize you for not disclosing (for example, long-term financial relationships that are now ended).

The goal of this section is to provide information for our reviewers and readers about your interactions with entities in the biomedical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer. For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to benefit financially from the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as the NIH or the MRC, need not be disclosed. For example, if the NIH sponsored a piece of work you have been involved in but drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

4. Financial relationships involving your spouse or partner or your children (under 18 years of age).

If monies from the types of relationships listed in Section 3 were paid to your spouse or partner or dependent children, please list the type of activity and source of the money.

5. Nonfinancial associations.

Please report any personal, professional, political, institutional, religious, or other associations that a reasonable reader would want to know about in relation to the submitted work.



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Surname:

Effective Date: 24-June-2011

Section 1. Identifying Information.

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Given Name:

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Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your institution	Entity	Comments	
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Payment for development of educational presentations including service on speakers' bureaus	\boxtimes					Del×
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Other (err on the side of full disclosure)	\boxtimes					Del ×
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