

#### 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 is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in four parts.

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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.

### The work under consideration for publication.

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Broge Richelsen



Section 1. Identifying Infor	mation		ŝĵ	1611
Given Name (First Name)     Christian Chinyama	Surname (Last Name)     Broge Richelsen		3. Effective Date (0 09-August-2013	7-August-2008)
Are you the corresponding author?	☐Yes ✓ No	Corresponding Author's Nam Peter schwarz	ne di	
5. Manuscript Title Kan medicingennemgang hos ældre cochranereview	hospitaliserede patienter re	ducere morbiditet og morta	litet? -en gennem	gang af et
6. Manuscript Identifying Number (if you	know it)		4.7	
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#### Section 2. The

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The Work Under Consideration f	or Pub	lication				
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant	<b>√</b>				變 "吐。	×
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Consulting fee or honorarium	✓				N. Table	×
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Support for travel to meetings for the study or other purposes	<b>V</b>					×
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4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like	<b>7</b>					×
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Payment for writing or reviewing the manuscript	<b>V</b>					×
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Provision of writing assistance, medicines, equipment, or administrative support	V					×

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Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
					麗 八张	ADD
7. Other	<b>✓</b>					×
* This means money that your in	stitution received	I for your ef	forts on this stud	y.		ADD

#### Section 3.

#### Relevant financial activities outside the submitted work.

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Relevant financial activities ou	tside th	e submit	ted work			
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
1. Board membership	<b>V</b>					×
2. Consultancy	<b>V</b>				488 - 4 65 C 14	ADD ×
The state of the s	to be experienced a special	-0-12-10-12-10-10-10-10-10-10-10-10-10-10-10-10-10-				ADD
3. Employment	V			on two constants and about the last the last throughout the delicity. The	rac scot i	×
4. Expert testimony	<b>/</b>			M1100-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	185 300-22 100 5 600 160 16 8	ADD X ADD
5. Grants/grants pending	<b>V</b>					×
. Program of the control of the cont	5.45140572865552400					ADD
Payment for lectures including service on speakers bureaus	<b>V</b>					×
•						ADD
7. Payment for manuscript preparation	<b>V</b>				# # # # # # # # # # # # # # # # # # #	×

<sup>\*\*</sup> Use this section to provide any needed explanation.



Relevant financial activities out	side the	e submit	ted work			er ger et stillege	I
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	;	
8. Patents (planned, pending or	<b>V</b>		П		87.	ADI	
issued)	ŭ.					ADI	
9. Royalties	<b>V</b>					X ADI	=
Payment for development of educational presentations	· 🗸			THE STATE OF THE S		· · · · ·	
						ADI	_
	✓		Ш			400	-
12. Travel/accommodations/ meeting expenses unrelated to activities listed**	<b>V</b>					×	
13. Other (err on the side of full disclosure)	<b>V</b>					×	
* This means money that your institution ** For example, if you report a consultan				ravel related to that consu	ltancy on this line	AD	2 CASSES
Section 4. Other relations	hips					30.00	
Are there other relationships or active potentially influencing, what you wr				to have influenced, or t	hat give the appear	ance of	死住野田
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#### **Evaluation and Feedback**

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



1. Given Name (First Name) Tore	<ol><li>Surname (Last Name)</li><li>Sloth Andersen</li></ol>		3. Effective Date (07-August-2008 08-August-2013
4. Are you the corresponding author?	Yes No	Corresponding Author's Na Peter Schwarz	me
5. Manuscript Title Kan medicingennemgang hos hospita en gennemgang af et cohcranereviev		norbiditet og mortalitet?	

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



The Work Under Co	onsideration for Pub	lication			A 50 K 10	
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
						ADD
7. Other	<b>✓</b>					×
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Relevant financial activities outside the submitted work							
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments		
1. Board membership	<b>V</b>					×	
2. Consultancy	<b>V</b>					ADD X	
3. Employment	<b>V</b>					×	
4. Expert testimony	<b>V</b>					ADD × ADD	
5. Grants/grants pending	1					×	
Payment for lectures including service on speakers bureaus	V					ADD X	
Payment for manuscript preparation	<b>V</b>					×	

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Travel/accommodations/ meeting expenses unrelated to activities listed**  Other (err on the side of full disclosure)  It is means money that your institution received for your efforts. Or example, if you report a consultancy above there is no need to report travel related to that consultancy on this line.	Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comment
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ection 4. Other relationships there other relationships or activities that readers could perceive to have influenced, or that give the appeara	. Other (err on the side of full disclosure)	<b>/</b>				
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No other relationships/conditions/circumstances that present a potential conflict of interest Yes, the following relationships/conditions/circumstances are present (explain below):	otentially influencing, what you wr	ote in th	e submitte	ed work? nat present a pote	ential conflict of inter	
he time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosu occasion, journals may ask authors to disclose further information about reported relationships.	t the time of manuscript acceptance					



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1. Given Name (First Name) Jens-Ulrik	2. Surname Rosholm	(Last Name)		3. Effective Date (07-August-2008 09-August-2013
4. Are you the corresponding author?	Yes	<b>√</b> No	Corresponding Author's Nat Peter Schwarz	me
5. Manuscript Title Kan medicingennemgang hos hospit -en gennemgang af et cohcranerewie 6. Manuscript Identifying Number (if you	2V.	e reducere n	norbiditet og mortalitet?	
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The Work Under Consideration for P	ublication				
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1. Grant	8				_ X
2. Consulting fee or honorarium					X ADD
3. Support for travel to meetings for the study or other purposes					×
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like		oard, stúdy de!			×
5. Payment for writing or reviewing the manuscript					X ADD
6. Provision of writing assistance, medicines, equipment, or administrative support					×

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7. Other	<b>V</b>					×
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2. Consultancy	1		TOTAL DESIGN			×		
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3. Employment	1	the Die	dica nots			X		
	The same of		ps that were pre-	(Ede Feli		ADD		
4. Expert testimony	✓					ADD		
E Cuenta levente nondina						X		
5. Grants/grants pending	1	Ш				ADD		
6. Payment for lectures including	MASS.					8807,68		
service on speakers bureaus	1					×		
						ADD		
7. Payment for manuscript preparation	<b>V</b>					×		

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Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments
. Patents (planned, pending or issued)	<b>V</b>				
Royalties	<b>V</b>				
D. Payment for development of educational presentations	<b>V</b>	D.	ntial Con	(New ed to	
1. Stock/stock options	<b>V</b>				
2. Travel/accommodations/ meeting expenses unrelated to activities listed**	<b>V</b>				
3. Other (err on the side of full , 'disclosure) provide pending or 's a	<b>V</b>				
*This means money that your institution is the For example, if you report a consultance to the Forestion 4.	y above	for your ef there is no	forts. need to report tra	vel related to that consult	ancy on this line.
Are there other relationships or activit potentially influencing, what you wro	ties that			have influenced, or th	at give the appearance of
✓ No other relationships/conditions  Yes, the following relationships/co			1 3		st
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Section 1.	Identifying Inforr	mation	
1. Given Name (Fi Peter	rst Name)	2. Surname (Last Name) Schwarz	3. Effective Date (07-August-2008) 08-August-2013
4. Are you the cor	responding author?	✓ Yes No	
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6. Manuscript Idei	ntifying Number (if you k	(now it)	
review			

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



The Work Under Consideration for Publication								
	Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**		
							ADD	
7. Other		<b>✓</b>					×	
							ADD	

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Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments			
1. Board membership	<b>✓</b>					×		
						ADD		
2. Consultancy	<b>✓</b>					×		
						ADD		
3. Employment	<b>✓</b>					×		
						ADD		
4. Expert testimony	<b>✓</b>					×		
						ADD		
5. Grants/grants pending	<b>✓</b>					×		
						ADD		
<ol><li>Payment for lectures including service on speakers bureaus</li></ol>	<b>✓</b>					×		
						ADD		
<ol><li>Payment for manuscript preparation</li></ol>	<b>✓</b>					×		

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Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments				
						ADD			
<ol><li>Patents (planned, pending or issued)</li></ol>	<b>✓</b>					×			
						ADD			
9. Royalties	<b>✓</b>					×			
						ADD			
<ol><li>Payment for development of educational presentations</li></ol>	<b>✓</b>					×			
						ADD			
11. Stock/stock options	<b>✓</b>					×			
						ADD			
12. Travel/accommodations/ meeting expenses unrelated to activities listed**	<b>✓</b>					×			
						ADD			
13. Other (err on the side of full disclosure)	<b>✓</b>					×			
* 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	Section 4								
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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?									

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?

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

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

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