

Section 1. Identifying Information	
1. Given Name (First Name) Henrih Woldburg Jepsen	3. Effective Date (07-August-2008)
4. Are you the corresponding author?	
5. Manuscript Title Can Awk Heclical achnissia	n be preventeil
6. Manuscript Identifying Number (if you know it)	1
06-12-0310	

## 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 Publication									
Type	No	Money Paid to You	Money to Your Institution	Name of Entity	Comments				
1. Grant	$\boxtimes$					×			
2. Consulting fee or honorarium	B					ADD			
Support for travel to meetings for the study or other purposes	Ø					ADD ×			
<ol> <li>Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like</li> </ol>	A					ADD ×			
Payment for writing or reviewing the manuscript	(M					ADD ×			
Provision of writing assistance, medicines, equipment, or administrative support						ADD ×			



The Work Under Consideration for Publication									
Туре	No Paid to Yo	y Money to Your u Institution	Name of Entity	Comments**					
7. Other	A D				ADD ×				
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#### Section 3. Relevan

#### 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.

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Relevant financial activities outside the submitted work								
Type of Relationship (in alphabetical order)		Money Paid to You	Meney to Your Institution*	Entity	Comments			
1. Board membership	B					×		
2. Consultancy	B					ADD ×		
3. Employment	X					ADD ×		
4. Expert testimony	K					ADD		
5. Grants/grants pending	因					ADD ×		
6. Payment for lectures including service on speakers bureaus	Ø					ADD ×		
7. Payment for manuscript preparation	A					ADD		

<sup>\*</sup> This means money that your institution received for your efforts on this study.

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



Relevant financial activities ou	itside the					
Type of Relationship (in alphabetical order)	No	Paid to You	Money to Your Institutions	Entity	Comments	
Patents (planned, pending or issued)	Ø.					AD ×
9. Royalties	B					AD ×
Payment for development of educational presentations	区					AD ×
11. Stock/stock options	Q					AD
12. Travel/accommodations/ meeting expenses unrelated to activities listed**						Abi ×
Other (err on the side of full disclosure)						ADE
* This means money that your institution ** For example, if you report a consultan  Section 4.  Other relations	cy above th	or your effo nere is no n	orts. eed to report tra	vel related to that consulta	incy on this line.	Apl
Other relations	-		uld marratus to	have in the second and		
Are there other relationships or activ potentially influencing, what you wro	ote in the	submitted	l work?	nave influenced, or tha	t give the appearance o	ţ.
No other relationships/condition	s/circumst	tances tha	t present a pot	ential conflict of interest		
Yes, the following relationships/c	onditions	/circumsta	ances are prese	nt (explain below):		
At the time of manuscript acceptance On occasion, journals may ask author	e, journals s to disclo	will ask au ose further	uthors to confir information at	m and, if necessary, upd bout reported relationsh	ate their disclosure stat ips.	ements
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Section 1. Identifying Info	ormation	
1. Given Name (First Name)	2. Surname (Last Name) HENDRIUSEN	3. Effective Date (07-August-2008)
4. Are you the corresponding author?	Yes No	
5. Manuscript Title Can Acuse Medic 6. Manuscript Identifying Number (if you	al administr be	fulvented

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The Work Under Consideration for Publication								
Турс	No	Mioney Perd to You	Money to Your Institution*	Name of Entity	Comments**			
1. Grant	¥					×		
2. Consulting fee or honorarium	X					ADIO ×		
Support for travel to meetings for the study or other purposes	٨					ADD		
<ol> <li>Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like</li> </ol>	X					ADD ×		
Payment for writing or reviewing the manuscript						ADD ×		
<ol> <li>Provision of writing assistance, medicines, equipment, or administrative support</li> </ol>	X					ADD ×		



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7. Other						ADB
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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	Communic				
1. Board membership	V					×			
2. Consultancy	K					ADD ×			
3. Employment	X					A(D)D			
4. Expert testimony						ADD ×			
5. Grants/grants pending	Ø					ADD ×			
Payment for lectures including service on speakers bureaus	Į					ADID			
Payment for manuscript preparation						ADD X			

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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)	N					AD ×
9. Royalties	×					A(D)
Payment for development of educational presentations	$\boxtimes$					ADH X
11. Stock/stock options	X					A(i)
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No other relationships/conditions/ Yes, the following relationships/co	'circumsta	ances that p	oresent a potenti	al conflict of interest explain below):		
at the time of manuscript acceptance, On occasion, journals may ask authors	journals	will ask auti	hors to confirm a	nd if necessary unde	te their disclosure statem	nents.

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On occasion, journals may ask authors to disclose further information about reported relationships.



Given Name (First Name)	2. Surname (Last Name)	Henrik 13, Effective Date (07-August-2008)
Are you the corresponding author?	Yes No	Kardinlogisk afdaling Y Bispebic of Hospital 2400 Kr. J. Hospital
Manuscript Title Can of Manuscript Identifying Number (if yo	in and admits on	· ( ( ) ( ) )

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The Work Under Consideration for Publication								
Туре	No	Money Paid	Money to Your	Name of Entity	Comments*			
1. Grant	P					×		
2. Consulting fee or honorarium						3.0D		
Support for travel to meetings for the study or other purposes						ADD X		
<ol> <li>Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like</li> </ol>						ADD ×		
Payment for writing or reviewing the manuscript						А0 <i>0</i> ×		
<ol> <li>Provision of writing assistance, medicines, equipment, or administrative support</li> </ol>						ADD ×		



The Work Under Consideration for Publication							
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7. Other	4					ADD ×	
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Relevant financial activities outside the submitted work						
Type of Relationship (in alphabetical order)	No	Paid to	Money to Your Institution	Entity	Comments	
1. Board membership	P					×
2. Consultancy	þ					A570 - X
3. Employment	þ					ADD ×
4. Expert testimony	ф					ADD ×
5. Grants/grants pending	ф					ADD ×
Payment for lectures including service on speakers bureaus	+					ADD ×
<ol> <li>Payment for manuscript preparation</li> </ol>	t					ADD ×

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



Type of Relationship (in alphabetical order)	No	Money Paid to Yeu	Maney to Your Institutions	Entity	Comments	
Patents (planned, pending or issued)	É					
9. Royalties	þ					
Payment for development of educational presentations	þ					A
. Stock/stock options						7.15 1.52
. Travel/accommodations/ meeting expenses unrelated to activities listed**						AU SX
Other (err on the side of full disclosure)	P					X
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				and, if necessary, up		



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Are you the corresponding au	thor? Yes No	
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#### Section 2.

#### The Work Under Consideration for Publication

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2. Consulting fee or honorarium	Ø					× 1
Support for travel to meetings for the study or other purposes	Ø					2.
<ol> <li>Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like</li> </ol>	Ø					×.
Payment for writing or reviewing the manuscript	<b>D</b>					X X
<ol> <li>Provision of writing assistance, medicines, equipment, or administrative support</li> </ol>	A					AUD X



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* This means money that y	Our institution received for your off			21/11/2

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Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments
1. Board membership	A				×
2. Consultancy	Ø				Au ×
3. Employment	Ø				Ani
I. Expert testimony	Ø				,ADD
Grants/grants pending	Ø				2000 X
. Payment for lectures including service on speakers bureaus	Ø				ADD ×
Payment for manuscript preparation	Ø				4.012

received for your efforts on this study.

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



Type of Relationship (in elphabetical order)	No	Money Paid to Yeu	Maney to Your Institutions	Entity	Comments	
Patents (planned, pending or issued)	A					
). Royalties						
Payment for development of educational presentations	A					No.
. Stock/stock options	Ø					210 5X
Travel/accommodations/ meeting expenses unrelated to activities listed**	Ø					AU X
Other (err on the side of full disclosure)	#					ADD X
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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.



1. Given Name (First Name)	2. Surname (bast Name)	3. Effective Date (07-August-2008)
4. Are you the corresponding author?	Yes No	
5. Manuscript Title	medical ac	lumonous be
5. Manuscript Identifying Number (if you		
Section 2 The Work Under	Consideration for Publication	

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<ol> <li>Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like</li> </ol>	A					A00
Payment for writing or reviewing the manuscript	Ó					ADD ×
Provision of writing assistance, medicines, equipment, or administrative support	A					AOD ×



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7. Other		
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Relevant financial activities outside the submitted work						
Type of Relationship (in alphabetical order)	No	Paid to	Money to Your Institutions	Entity	Comments	
1. Board membership	Ø					×
2. Consultancy						× ×
3. Employment	2					ADD ×
4. Expert testimony	R					ADD ×
5. Grants/grants pending	8					ADD ×
Payment for lectures including service on speakers bureaus	P					ADD ×
7. Payment for manuscript preparation	7					ADD

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Type of Relationship (in alphabetical order)	No		Monay to Your Institution*	Entity	Comments	
Patents (planned, pending or issued)	9					ADI ×
9. Royalties	$\square$					ию. Х
Payment for development of educational presentations						Albia X
1. Stock/stock options	P					ADIO ×
<ol> <li>Travel/accommodations/ meeting expenses unrelated to activities listed**</li> </ol>						A00
<ol> <li>Other (err on the side of full disclosure)</li> </ol>	B					And ×
This means money that your institution * For example, if you report a consultance	received fo	or your effort	5.	WV De 19		NEW Y

Section 4.	Other relationships
Are there other potentially inf	er relationships or activities that readers could perceive to have influenced, or that give the appearance of Juencing, what you wrote in the submitted work?
No other re Yes, the fol	elationships/conditions/circumstances that present a potential conflict of interest llowing relationships/conditions/circumstances are present (explain below):
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