

ICMJE Form for Disclosure of Potential Conflicts of Interest

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 six parts.

1. Identifying information.

2. The work under consideration for publication.

This section asks for 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 requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" 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 with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

5. Relationships not covered above.

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Section 1. Identifying Information

1. Given Name (First Name)
Anne
2. Surname (Last Name)
Braae Olesen
3. Date
03-February-2014
4. Are you the corresponding author? Yes No
Corresponding Author's Name
Eva Benfeldt
5. Manuscript Title
Voksende udfordringer vs. forbedrede behandlingsmuligheder indenfor hudcancer
6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Made a speech for a medical company Almirall financed symposium	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Section 1. Identifying Information

1. Given Name (First Name)
Merete

2. Surname (Last Name)
Hædersdal

3. Date

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Eva Benfeldt

5. Manuscript Title

Voksende udfordringer vs forbedrede behandlingsmuligheder for hudcancer

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Almirall	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Research grant
Galderma	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Research grant
Leo Pharma	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Research grant

Section 4. Intellectual Property -- Patents & Copyrights

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Section 1. Identifying Information

1. Given Name (First Name)
Hans Christian
2. Surname (Last Name)
Wulf
3. Date
03-February-2014
4. Are you the corresponding author? Yes No
Corresponding Author's Name
Eva Benfeldt
5. Manuscript Title
Voksende udfordringer vs. forbedrede behandlingsmuligheder indenfor hudcancer
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Dr. Wulf has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Robert
2. Surname (Last Name)
Gniadecki
3. Date
03-February-2014
4. Are you the corresponding author? Yes No
Corresponding Author's Name
Eva Benfeldt
5. Manuscript Title
Voksende udfordringer vs forbedrede muligheder...
6. Manuscript Identifying Number (if you know it)

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Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Janssen	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
MSD	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pfizer	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Leo Pharma	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Abbvie	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

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Dr. Gniadecki reports grants, personal fees and non-financial support from Janssen, personal fees and non-financial support from MSD, personal fees from Pfizer, personal fees from Leo Pharma, grants, personal fees and non-financial support from Abbvie, outside the submitted work; .

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1. Given Name (First Name)

Eva

2. Surname (Last Name)

Benfeldt

3. Date

03-February-2014

4. Are you the corresponding author?

Yes No

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Voksende udfordringer vs. forbedrede behandlingsmuligheder indefor hudcancer

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